

**THE EFFECT OF SHORT-TERM SOY ISOFLAVONE SUPPLEMENTATION ON mRNA IN  
LOCALIZED PROSTATE CANCER**

BY

Jessica D. Rubin, RD LD

Submitted to the graduate degree program in Dietetics and Nutrition and the Graduate  
Faculty of the University of Kansas in partial fulfillment of the requirements  
for the degree of Master of Science.

Committee Chair:

---

Jill Hamilton-Reeves, PhD RD LD

Committee Members:

---

Susan Carlson, PhD

---

Prabhakar Chalise, PhD

---

Andrew K. Godwin, PhD

Date defended: 11 July 2013

The Thesis Committee for Jessica D. Rubin  
certifies that this is the approved version of the following thesis:

**THE EFFECT OF SHORT-TERM SOY ISOFLAVONE SUPPLEMENTATION ON mRNA IN  
LOCALIZED PROSTATE CANCER**

Committee Chair:

---

Jill Hamilton-Reeves, PhD RD LD

Date approved: 11 July 2013

## ABSTRACT

**Background:** Soy isoflavones have been hypothesized to affect gene expression related to prostate cancer development and progression, yet few studies have evaluated the effect of this phytochemical on the transcriptome of prostate cancer cells in a human model.

**Objective:** To determine if short-term soy isoflavone supplementation influences gene expression in men with localized prostate cancer.

**Methods:** Six men diagnosed with clinically localized prostate cancer were asked to take a soy isoflavone supplement for up to 6 weeks prior to radical prostatectomy. Total RNA was isolated and sequenced from tumor and adjacent normal frozen prostate tissue pairs obtained from these participants. Gene expression profiles were determined, differentially expressed genes were identified, and gene expression profiles were mapped to molecular pathways for biological interpretation using Ingenuity Pathway Analysis software (Ingenuity Systems®, [www.ingenuity.com](http://www.ingenuity.com)). The trimmed mean of the M values method (TMM, where  $M = \log_2$  fold change) was used to calculate the normalization factor. Quantile-adjusted conditional maximum likelihood (qCML) method was used to estimate common dispersion across all genes. Exact test with a negative binomial distribution was used to calculate expression differences between groups. Multiple test adjustments were carried out using the false discovery rate (FDR) using Benjamini and Hochberg's method. An FDR value of  $< 0.05$  was considered statistically significant.

**Results:** All 6 men were included in the final analysis. Soy isoflavones differentially expressed 128 genes in cancerous prostate tissue and 166 genes in normal prostate tissue. Twenty genes were differentially expressed in both tissues, 2 of which were differentially regulated in either tissue. Some pathways suggested a protective effect (human embryonic stem cell pluripotency, complement system, protein citrullination, and methylglyoxal degradation VI pathways), while others suggested harm (intrinsic and extrinsic prothrombing activation and IL-17A pathways). The following pathways were of unknown relevance: acute phase response signaling, UDP-glucuronosyltransferase, and glutamate-dependent acid resistance pathways.

**Conclusion:** Short-term soy isoflavone supplementation prior to curative treatment for localized prostate cancer was found to significantly affect gene expression in tumor and adjacent normal tissues.

## **ACKNOWLEDGEMENTS**

Dr. Peter Van Veldhuizen conducted the parent study and provided access to the data. Sarah Spencer assisted with access to the VAMC and provided study documents. Dr. Emma Borrego Diaz Reyes allowed the use of her laboratory to process banked biospecimens. Dr. Safinur Atay isolated the RNA from snap-frozen prostate tissue specimens. Clark Bloomer conducted RNA sequencing and prepared the libraries. Dr. Brooke Fridley and Dr. Prabhakar Chalise conducted statistical analyses. Dr. Byunggil Yoo and Dr. Rama Raghavan converted RNA sequencing data into FastQ files and de-multiplexed into individual sequences. Dr. Yoo also provided access to Ingenuity Pathway Analysis software. Dr. Joshua Griffin provided access to Research Electronic Database Capture. Dr. Jill Hamilton-Reeves, Dr. Susan Carlson, Dr. Andrew Godwin, and Dr. Prabhakar Chalise were members of the thesis committee.

## TABLE OF CONTENTS

<b>CHAPTER I: INTRODUCTION.....</b>	<b>1</b>
Statement of purpose.....	2
Objectives.....	3
Structure of thesis.....	4
<b>CHAPTER II: BACKGROUND AND LITERATURE REVIEW.....</b>	<b>6</b>
Prostate cancer.....	6
Nutrigenetics and nutrigenomics.....	7
Transcriptomics.....	9
Soybeans.....	10
Potential mechanisms of action.....	12
Effects of bioactive dietary components on the transcriptome.....	13
Summary.....	16
<b>CHAPTER III: MATERIALS AND METHODS.....</b>	<b>18</b>
Study overview.....	18
Materials.....	19
Soy isoflavone and placebo capsules.....	19
Methods.....	19
Urine sample collection and analysis for compliance.....	19
Prostate tissue collection and analysis.....	20
RNA sequencing.....	21
Statistical analysis.....	23

Bioinformatics.....	24
Electronic medical record abstraction.....	24
Data collection.....	25
<b>CHAPTER IV: RESULTS.....</b>	<b>27</b>
Subject characteristics.....	27
Urinary isoflavone levels.....	27
Differential gene expression.....	28
Pathway analyses.....	29
Tumor tissue.....	29
Normal tissue.....	30
Overlapping pathways.....	31
Electronic medical record data.....	32
<b>CHAPTER V: DISCUSSION.....</b>	<b>92</b>
Potentially harmful effects of soy isoflavones.....	92
Normal and tumor tissue.....	92
Normal tissue.....	93
Potentially beneficial effects of soy isoflavones.....	93
Tumor tissue.....	93
Normal tissue.....	95
Unknown role in prostate cancer.....	96
Tumor tissue.....	96
Normal tissue.....	97

Overlapping pathways.....	97
Strengths and limitations.....	98
Conclusion.....	99
<b>CHAPTER VI: REFERENCES.....</b>	<b>101</b>



## LIST OF TABLES

**Table 1.** Biospecimen inventory of study sample

**Table 2.** Frozen prostate tissue in total inventory

**Table 3.** Baseline characteristics of study sample

**Table 4.** Urinary isoflavone concentrations (nmol/L) of study sample

**Table 5.** Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 128 differentially expressed genes from tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 6.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 128 differentially expressed genes from tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 7.** Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 108 differentially expressed genes from only tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 8.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 108 differentially expressed genes from only tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 9.** Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 186 differentially expressed genes from normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 10.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 186 differentially expressed genes from normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 11.** Differentially expressed genes (FDR <0.05) down-regulated by soy isoflavone supplementation of the 166 differentially expressed genes from only normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 12.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 166 differentially expressed genes from only normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 13.** Differentially expressed genes (FDR < 0.05) present in both normal and tumor tissues obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 14.** Differentially expressed genes (FDR < 0.05) present in and differentially regulated by soy isoflavone supplementation in normal tissue compared to tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 15.** Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 20 differentially expressed genes present in both normal and tumor tissues obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 16.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 20 differentially expressed genes present in both normal and tumor tissues obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

**Table 17.** Top 5 significantly enriched canonical pathways expressed in tumor tissue

**Table 18.** Top 5 significantly enriched canonical pathways expressed in normal tissue

**Table 19.** Top 5 significantly enriched canonical pathways expressed in both normal and tumor tissues

**Table 20.** Specific genes expressed within the top 5 significantly enriched canonical pathways expressed in normal tissue, tumor tissue, and both tissues

**Table 21.** Clinical outcomes for study sample

## LIST OF FIGURES

**Figure 1.** Participant flow diagram

**Figure 2.** Top 5 significantly enriched canonical pathways expressed in tumor tissue

**Figure 3.** Percentage of genes expressed in the dataset within the top 5 significantly enriched canonical pathways expressed in tumor tissue

**Figure 4.** Top 5 significantly enriched canonical pathways expressed in normal tissue

**Figure 5.** Percentage of genes expressed in the dataset within the top 5 significantly enriched canonical pathways expressed in normal tissue

**Figure 6.** Top 13 significantly enriched canonical pathways expressed in both normal and tumor tissues

**Figure 7.** Percentage of genes expressed in the dataset within the top 13 significantly enriched canonical pathways expressed in normal and tumor tissues

## **CHAPTER I: INTRODUCTION**

Prostate cancer remains the most commonly diagnosed non-cutaneous cancer and the second leading cause of cancer deaths in American men (1). In 2013, an estimated 238,590 American men will receive a prostate cancer diagnosis, while approximately 29,720 American men will die from the disease (1). Global incidence data indicates that the highest rates of prostate cancer occur in North America, Australia, and Northern and Western Europe, while the lowest rates occur in Asia and North Africa (2). Although increased screening and health care differences likely contribute to this discrepancy, it is possible that the difference in incidence relates to diet and lifestyle. Population migration studies have shown that prostate cancer incidence increases among Asian men who adopt Western diet and lifestyle patterns after relocating to Western countries (3). Furthermore, population studies have shown that prostate cancer incidence increases among men who adopt Western diet and lifestyle patterns while in their home countries (3). Traditional Asian diet patterns are typically plant-based and include many foods found to contain phytochemicals, which are bioactive compounds thought to play a role in cancer prevention. For example, soybeans, which represent a major protein source in traditional Asian diets, contain bioactive phytochemicals collectively referred to as isoflavones. Replacing the animal proteins emphasized in Western diets with this plant-based protein may explain the difference in prostate cancer rates between Asian and Western countries.

The mechanisms through which soy isoflavones act to affect the development and progression of prostate cancer have been of recent interest. Evidence from cell line

and animal studies suggests that soy isoflavones can affect pathways associated with cell growth, cell cycle progression, and apoptosis (4). Soy isoflavone supplementation in both animal and human models seems to reduce the risk of developing prostate cancer (4); however, the precise mechanism(s) that mitigate this risk have yet to be determined. It is thought that soy isoflavones affect the transcription of certain genes as well as the expression of proteins implicated in prostate cancer development and progression (5,6).

The increasing use of and continued improvements in high-throughput analysis techniques, such as DNA microarrays and massively parallel next-generation sequencing (NGS), have facilitated the rapid discovery of many oncogenes and tumor suppressor genes (7). These technologies have allowed scientists to characterize cancerous tissues, identify differential gene expression between cancerous and normal tissues, investigate the effects of potential therapies, and contribute to a more thorough understanding of the interactions among the genome, epigenome, transcriptome, proteome, and metabolome within the context of prostate cancer. NGS technologies could not only help identify and develop effective prostate cancer treatments, but could also help elucidate the potential chemopreventative effects of dietary components such as soy isoflavones.

### **Statement of purpose**

Applying NGS technology to tissue samples inherited from a previous study, the present study will investigate the following question: Does short-term soy isoflavone supplementation influence gene expression in men with localized prostate cancer?

## **Objectives**

This exploratory project seeks to characterize RNA sequencing data derived from the NGS analysis of prostate tissue exposed to soy isoflavones or placebo and obtain preliminary data for future studies. The research question will be investigated by addressing the following specific aims:

1. To identify the effect(s) of soy isoflavones on prostate cancer by comparing gene transcripts found in cancerous prostate tissues of men supplemented with soy isoflavones to those of men randomly assigned to a placebo control group.
2. To identify the effect(s) of soy isoflavones on prostate cancer by comparing gene transcripts found in adjacent normal prostate tissues of men supplemented with soy isoflavones to those of men randomly assigned to a placebo control group.
3. To identify the effect(s) of soy isoflavones on prostate cancer by comparing gene transcripts found in cancerous and adjacent normal prostate tissues of men supplemented with soy isoflavones to those of men randomly assigned to a placebo control group.

4. To explore the biological relationships among the most significant of the differentially expressed gene transcripts by conducting pathway analyses using Ingenuity Pathway Analysis (Ingenuity® Systems, [www.ingenuity.com](http://www.ingenuity.com)).

The overall hypothesis is that short-term soy isoflavone supplementation will influence the expression of several genes related to prostate cancer development and progression. The goal of the study is to gain insight into the general biological and molecular functions that are altered as a result of soy isoflavone treatment in patients with localized prostate cancer.

### **Structure of thesis**

This study seeks to explore the effects of soy isoflavones on the development and progression of prostate cancer by investigating changes in the transcriptome. The review of literature will serve two purposes: 1) to provide background information on soy isoflavones, nutritional genomics, and RNA sequencing technology, and 2) to review the published scientific literature on the effects of dietary bioactive interventions on the transcriptome, while highlighting those that have utilized soy isoflavone interventions. This will be followed by a discussion of the materials and methods used in the present study, and a description of the statistical analyses employed to identify differentially expressed genes. The results of the study will be presented and summarized, followed by a thorough discussion of the significance of these results in the context of the available literature. The thesis will conclude with an evaluation of the study's overall



strengths and weaknesses and will suggest directions for future research. All supplemental information (e.g. tables, illustrations, charts, and graphs) will appear in the appendix.

## **CHAPTER II: BACKGROUND AND LITERATURE REVIEW**

### **Prostate cancer**

Although prostate cancer treatments have improved significantly, the disease continues to claim the lives of thousands of men every year (1). When prostate cancer remains localized within the prostate gland, it is surgically removed during a radical prostatectomy procedure. Localized prostate cancer is also treated with radiation therapy. This treatment regimen has reduced the number of prostate cancer deaths by 40% over the past twenty years and resulted in a 5-year survival rate of 100% (8). However, approximately 35% of men continue to experience biochemical recurrence (BCR), i.e. an increase in prostate-specific antigen (PSA) values (the biochemical marker currently used to screen for prostate cancer) following initial treatment, within 5 years (9). Though salvage therapies exist to treat biochemically recurrent disease, they may not effectively cure prostate cancer. In one study, 68% of men with BCR who initially received a prostatectomy and 74% of men with BCR who initially received radiation therapy failed salvage therapy at approximately 3.5 years (10). These men typically develop metastatic disease, characterized by the spread of the initial prostate cancer into distant tissues such as lymph nodes, adrenal glands, lungs, liver, and bone (8,11). Approximately 72% of distant metastatic cancers will result in death within 5 years (8).

Physicians lack the clinical tools that would help them recognize aggressive prostate cancer in order to provide timely and appropriate therapies (7). Currently, physicians evaluate a combination of several clinical characteristics (e.g. preoperative PSA values, Gleason score) to detect prostate cancer and predict the likelihood of BCR

and metastasis. Because this screening methodology lacks specificity and sensitivity, many men remain undiagnosed and under-treated, while others are over-treated. A more thorough understanding of the genetic mechanisms behind prostate cancer development and progression is needed in order to identify biomarkers that can detect aggressive prostate cancer and to apply appropriate treatments (7,12).

The development of, access to, and relative affordability of microarray technologies as well as the accumulation of data from studies using these technologies have allowed for a more comprehensive view of the genes and biochemical pathways expressed in prostate cancer. Comparing gene expression profiles between normal and diseased tissue allows for the identification of candidate biomarkers of prostate cancer (7). For example, the evaluation of data obtained from high-throughput analysis points toward a product of a gene known as EZH2 as a marker of advanced prostate cancer (11). A similar methodology can be applied to prostate cancer tissues that have been exposed to dietary bioactives in order to gain an understanding of diet's effect on genetic expression.

### **Nutrigenetics and nutrigenomics**

Though nutrigenetics and nutrigenomics are closely related fields and though they both operate under the overarching hypothesis that health can be improved by tailoring nutrition recommendations to an individual's genetic profile, they are not synonymous: the former refers to the study of how genes affect nutrient uptake and metabolism, while the latter refers to the study of how bioactive food compounds affect

the “omics” (13). The “omics” refer to the study of each stage of genetic replication according to the classical paradigm; therefore, the “omics” include genomics, epigenomics, transcriptomics, proteomics, and metabolomics.

When a cell divides, it replicates its DNA for the new cell. Every cell in the human body carries the same DNA; however, a cell’s function determines the expression of those genes. Genetic expression begins with transcription, a process that involves copying the genetic information encoded within the DNA strand by generating complementary RNA molecules. Three types of RNA are used in the process: messenger RNA, ribosomal RNA, and transfer RNA. Molecules of mRNA determine the order of amino acids; during translation, tRNA molecules use the information encoded in the mRNA to select the correct amino acid for the growing protein chain, while rRNA fuses the amino acids together to form a complete protein product (14).

The number and type of transcripts within a cell is termed the transcriptome, and it can be used to describe the cell. All cells contain the same DNA, but the function of the cell affects the transcriptome. Quantifying the transcripts present in a cell indicates which genes are being expressed in that cell at that point in time (14). By comparing the transcripts of normal and diseased cells, transcriptomic technologies can help identify which genes are being expressed or silenced by cancerous processes. Similarly, by comparing the transcripts of cells exposed to dietary bioactives to those of unexposed cells, transcriptomic technologies may identify which protective genes are being up-regulated by the chemical or which cancer-promoting genes are being down-regulated by the chemical.

## **Transcriptomics**

Over the past several years, technology for evaluating the transcripts of cells has evolved, improved, and become more financially feasible. Transcriptomic studies characterize and quantify the RNA content of a given cell or tissue sample, use the data to deduce gene expression, and determine the biological significance of differentially expressed genes by interpreting them within the context of established molecular pathways (15). Real-time quantitative PCR (qPCR), microarrays, and massively parallel next-generation RNA sequencing, or RNA-seq, are the three major techniques for examining the transcriptome (16). The qPCR method is most appropriate for looking at a small number of transcripts (16). Microarrays and RNA sequencing can identify transcripts expressed across the entire genome (16). Microarrays can only detect sequences already specified on the array, while RNA sequencing technologies can detect all mRNA sequences as well as microRNAs, long non-coding RNAs, and strand-specificity (16). Because of this, RNA sequencing technologies are best suited for exploratory studies such as the present study. RNA sequencing applications include Illumina's TruSeq Stranded mRNA Sample Preparation Kit, Life Technologies' SOLiD® Total RNA Seq Kit, and Agilent's SureSelect Strand Specific RNA Library Preparation Kit (16).

Essentially, RNA-seq consists of five distinct phases: 1) isolating the RNA from the sample, 2) preparing a library of cDNA molecules, 3) sequencing by synthesis, 4) aligning the raw reads to a reference transcriptome or genome, and 5) determining statistical significance for differential gene expression. The identification of differentially

expressed genes helps determine the function of genes as the cells respond to different treatments or conditions.

RNA-Seq produces large, complex data sets. The acquisition, management, storage, retrieval, and analysis of these data sets represent significant challenges when working with RNA sequencing data (13). The high cost of RNA sequencing limits the number of samples that can be analyzed; therefore, comparing different doses and different time points can rarely be examined and only general effects can be identified (17). Transcriptomic studies also vary considerably in terms of experimental design, microarray technology, statistical methodology, patient characteristics, and dietary bioactive (7,15), making it somewhat difficult to draw meaningful conclusions from the available literature. The microarray technology itself further complicates matters as the reliability of data can be compromised by the source (e.g. cell lines or human tissue) and quality of mRNA (17,18). Although “omics” research continues to contribute novel data, results must be placed within the context of the each subject’s nutrition status, lifestyle habits, clinical profile, physiological conditions, demographics, and environmental factors (13).

## **Soybeans**

Soybeans, a plant native to Southeast Asia, are legumes that represent a high-quality, complete protein source (19). Soybeans may be steamed, roasted, or processed into different soy-based products, ranging from more traditional soy foods (e.g. tofu, miso, tempeh, and soy milk) to “second generation” soy-based infant formulas,

meatless soy burgers, soy protein isolate, soy flour, and various food additives (20).

Even though traditional soy products are a staple of Asian cuisine, North American soy food sales have increased \$1 billion to \$5.2 billion over the past 15 years (21). The United Soybean Board reported that 37% of Americans consumed soy products at least once a month in 2011 (21). On average, however, Americans and Europeans consume less than 1 gram of soy protein per day. Conversely, Asian cultures consume much more soy protein than Americans and Europeans. The Japanese consume 8.7 g daily; Koreans, 6.2-9.6 g; Indonesians, 7.4 g; and the Chinese, 3.4 g (20,22).

Soybeans contain several bioactive compounds, including isoflavones.

Isoflavones belong to a class of phytochemicals called phytoestrogens, a group of compounds with chemical structures resembling that of estrogen (20). Though isoflavones occur in other plants, soybeans represent the most commonly consumed source of dietary isoflavones in the American diet. Soybeans contain three major isoflavones: genistein, daidzein, and glycitein. Within unprocessed soybeans, these isoflavones are bound to sugar molecules, present as the biologically inactive compounds genistin, daidzin, and glycitin (20). During digestion, isoflavones undergo separation from these sugars and become the biologically active isoflavones, usually referred to as aglycone isoflavones (20).

The isoflavone content in soybeans and soy-based products varies according to their growing environment, the amount and type of food processing, and individual variation in human digestion, among other factors. For example, 3.3 oz steamed soybeans (i.e. edamame) contains ~50 mg isoflavones, while the same amount of

cooked soybeans contains ~18 mg isoflavones (23). Soy protein concentrate produced by alcohol extraction has only ~11.5 mg isoflavones per 3.3 oz, while soy protein concentrate produced by aqueous extraction has ~95 mg isoflavones for the same amount (23). Additionally, daidzein can be further metabolized into equol, a metabolite that may elicit a biological effect in the intestines of approximately 30% of Americans (24). Because soy protein is more frequently consumed among Asian populations than Western populations, it stands to reason that isoflavone intake is also higher in Asian populations than Western populations. On average, the Japanese consume approximately 27 mg isoflavones, or one serving of soy food, daily (25–27). In contrast, those consuming a typical Western diet consume an average of 2-3 mg isoflavones per day (28).

### **Potential mechanisms of action**

Many *in vitro* and *in vivo* studies have been conducted to determine the potential mechanisms of action through which soy isoflavones exert their hypothesized chemopreventative effects; however, data remain inconclusive as study designs vary widely in terms of isoflavone dose, form of administration, or timing and duration of exposure (17). Unfortunately, many *in vitro* studies tend to supply isoflavones at concentrations that exceed those that could be achieved in human plasma or tissues by tolerable oral intake (29). Steiner et al. (17) report that isoflavone concentrations as high as 1-2.5 nmol/g can be achieved in prostate tissue after short-term supplementation. This complicates the interpretation of any anti-carcinogenic effect



produced by soy isoflavones in such studies, as any preventative effect seen would be impossible to obtain through the diet (17).

Despite this variability, isoflavones have been shown to modulate steroid synthesis, transport, and metabolism; inhibit protein tyrosine kinases; modify nuclear receptor binding, hormone receptor binding, and other cell signaling pathways; induce apoptosis, anti-oxidant effects, and cell cycle arrest; and suppress metastasis and angiogenesis (17,30). High-throughput data analysis techniques are being used to investigate these effects more closely by attempting to identify how soy isoflavones regulate the expression of genes related to these observed effects involved in prostate cancer prevention, development, and progression. Published studies that investigate the effects of nutritional interventions on the transcriptome vary considerably in terms of dietary bioactive, matrix, and dose; biological specimen, medical condition of interest, population, and sample size; intervention duration; microarray platform (i.e. RNA methods); as well as statistical techniques and software tools used to evaluate biological significance.

### **Effects of bioactive dietary components on the transcriptome**

A transcriptomic approach has been used to investigate the influence of various bioactives on genes related to various medical conditions. In addition to prostate cancer, the medical conditions represented in this review include obesity, weight loss, metabolic syndrome, hyperlipidemia, cardiovascular disease, osteoporosis, zinc deficiency, and colon cancer. The transcripts of healthy individuals were also evaluated.

With the exception of soy isoflavones in prostate cancer, this review revealed little consistency among the dietary bioactives used. Some *in vivo* studies took advantage of the micronutrients and phytochemicals already present in or derived from different foods, including the anthocyanins and flavonols in dried and pureed bilberries (31), the zinc content of various foods (32), the sulforaphane content in broccoli (33), and the isoflavone content of tofu (34). Other *in vivo* studies artificially supplemented diets or provided dietary supplements to subjects. Rodents were typically supplemented per kg body weight or per kg diet (35–37), while humans received capsules containing bioactive substances (30,38–41) or oral dietary supplements (32). *In vitro* studies exposed established cell lines or cells derived from harvested tissues to purified concentrations of micronutrients or phytochemicals, including sulforaphane (33,42), curcumin (43), kuguacin-J (44), genistein (41,45–49), daidzein (30), and equol (30).

The studies that implemented soy isoflavone interventions in prostate cancer (n = 6) used purified isoflavone solutions (30,41,46–49) or isoflavone-containing capsules (30,41). The isoflavone solutions used for *in vitro* studies ranged in concentration from 0.0075  $\mu$ M to 100  $\mu$ M per liter (30,41,46–49). In one of the human studies, participants consumed a pill containing 27.2 mg mixed isoflavone aglycones three times daily, or approximately 82 mg mixed isoflavones daily (30). In the other human study, participants consumed a capsule containing 150 mg genistein only (40).

Though the attempt was made to focus on human interventions, this literature review also included *in vitro* studies and rodent models when needed. Studies of various bioactives in various medical conditions (n = 5) focused exclusively on human

interventions. Sample sizes were generally limited, ranging from 3 (31,38,42) to 16 participants (39). The source of the biospecimen obtained from these participants also varied, including tumor and adjacent normal colon tissue (42), cheek cells (32), and blood (31,32,38,39). Notably, the majority of these studies used biospecimens that were relatively non-invasive and easy to obtain from human participants.

Studies of various bioactives on the prostate cancer transcriptome used LNCaP cells (33,43), PC-3 cells (44), C4-3B cells (43), and cells derived from the tumor tissue of Copenhagen rats with MatLyLu Dunning-induced prostate cancer (35). Studies that investigated the effect of soy isoflavones on the transcriptome of various tissue types employed both rodent (34,36,37,45,50) and human models (40), including female Zucker rats, male and female Sprague-Dawley rats, and healthy post-menopausal women. Prostate cancer cell lines, specifically LNCaP cells (30,47,49), PC-3 cells (30,41,46,48,49), PC-3-M cells (41), DU-145 cells (48), 1532-NPTX (41), 1542-NPTX (41), 1532-CPTX (41), 1542-CPTX (41), and RWPE-1 cells (49), were used in studies of soy isoflavones on the prostate cancer transcriptome. The two studies with human participants (30,41) used prostatectomy tissue samples obtained from male prostate cancer patients who consumed a soy isoflavone supplement prior to surgery.

Although the duration of the nutritional interventions varied considerably, the majority were relatively short. The majority of rodent studies provided dietary intervention for 2 weeks (34,37,51), while others continued for 4 weeks (41), 6 weeks (35), 12 weeks (36,45), or 40 weeks (50). Prostate cancer cell lines were exposed to various bioactive dietary supplements for 2 to 96 hours, and at regular time points

within this range (30,33,41–44,46–49). Human dietary interventions ranged from 2 weeks (30,38,41) to 11 weeks (40). The *in vitro* studies that implemented soy isoflavone interventions in prostate cancer lasted between 6 (46) and 96 hours (47), while both human studies lasted between 2 and 6 weeks (30,41). All reviewed studies reported statistically significant results, suggesting that dietary supplementation can effect a change in genetic expression in a relatively short time period.

None of the studies reviewed used massively parallel next-generation sequencing techniques to evaluate the effects of dietary bioactives on the transcriptome. Many used qPCR to evaluate the transcriptome, some of which correlated microarray data with the results of the more established qPCR technique (30–32,34,36,37,39,41,44–47,49,51). Many others used microarrays (33,35,38,40,42,43,46,48,50,51). The most common microarray used was Affymetrix GeneChip® Gene Expression (35,38,42,43,48,50,51). Because the present study uses next-gen technology, it will be able to more thoroughly evaluate the transcriptomic response of prostate cancer to soy isoflavones.

## **Summary**

A review of the relevant published literature indicates that micronutrient and other dietary bioactive compounds can induce a change in the transcriptome of cells derived from various tissues in as little as 2 weeks. These studies illustrate how evaluating the transcriptome of various cells can be used to investigate the effects of micronutrients and other dietary bioactives. Importantly, significant results were

discovered despite the fact that many of these studies used physiological doses of their respective supplements. Human transcriptomic studies are few, especially when focusing specifically on soy isoflavones and prostate cancer, and most of these had a very limited sample size.

The present study seeks to explore the effect of soy isoflavones on gene expression in prostate cancer using the insights provided by RNA sequencing applications. Gene expression profiles will be obtained by isolating and sequencing the RNA of fresh frozen prostate tissue collected from 6 participants who underwent radical prostatectomy for the treatment of localized prostate cancer. These participants received either a soy isoflavone supplement that provided 51 mg total aglycone equivalents per day or a matching placebo capsule for up to 6 weeks before the operation. The transcripts of normal and tumor tissue from each participant will be quantified and subsequently mapped to known genes. Differentially expressed genes will be identified. The biological relationships among these genes will be evaluated and interpreted using Ingenuity Pathway Analysis software (Ingenuity Systems<sup>®</sup>, [www.ingenuity.com](http://www.ingenuity.com)). The list of highly expressed genes will be used to further explore the effect of soy isoflavones on genetic expression in prostate cancer.

## CHAPTER III: MATERIALS AND METHODS

### Study overview

Under a protocol approved by the Institutional Review Boards at the University of Kansas (KUH) and the Kansas City Veterans Affairs Medical Center (VAMC), 86 men diagnosed with prostate cancer who were scheduled to undergo prostatectomy were enrolled in the study after providing informed consent. Eligibility criteria included: histologically confirmed prostate adenocarcinoma, clinically localized disease (stage T1 or T2), and medical clearance for surgery. Exclusion criteria included: concurrent chemotherapy, radiation, or hormone therapy, consumption of soy foods within 90 days prior to enrollment or during the study, initiation of any new vitamin, mineral, or herbal supplement during the study, and a known history of soy allergy or intolerance. The study was a double-blinded, randomized, placebo-controlled trial in which participants were asked to take study capsules for up to 6 weeks before operation. Participants were randomized to receive either a soy isoflavone supplement (n = 42) or a matching placebo (n = 44). Between April 2006 and May 2009, each participant provided biological specimens for future analysis, including urine samples and snap frozen prostate tissue (both normal and tumor samples), which were subsequently banked at the VAMC.

The current study focused on a subsample (n = 6) of the original 86 participants, and analyzed and sequenced total RNA isolated from tumor and adjacent normal frozen prostate tissue obtained from these participants (**Figure 1**). From the RNA sequencing data, gene expression profiles were determined, differentially expressed genes were

identified, and gene expression profiles were mapped to molecular pathways for biological interpretation.

## **Materials**

### ***Soy isoflavone and placebo capsules***

The treatment group received a commercially available, soy isoflavone capsule (Flav-ein, 3 B'S Ltd., Lenexa, KS) derived from soy germ that provided 51 mg total isoflavone aglycone equivalents per day, with an average distribution of 55% daidzein, 30% glycitein, and 15% genistein as analyzed by an independent laboratory (NP Analytical Laboratories, St. Louis, MO). The placebo pills were manufactured to appear identical to the isoflavone capsules and provided <0.06 mg isoflavones per day (NP Analytical Laboratories, St. Louis, MO).

## **Methods**

### ***Urine sample collection and analysis for compliance***

Urine samples were collected at baseline, 2 weeks, and immediately prior to prostatectomy. Samples were stored at -80°C without preservative. Urine samples collected between 2 and 4 weeks from baseline were selected for isoflavone analysis. Frozen urine samples were thawed overnight, aliquoted into 2-mL tubes, packed in dry ice, and shipped. The urinary concentration of 3 isoflavones and 3 isoflavone metabolites (genistein, daidzein, glycitein, equol, dihydrodaidzein, and O-desmethyldaidzein) were measured at the University of Minnesota using a high

pressure liquid chromatography-tandem mass spectrometry (LC-MS/MS) method based on a previously used method (52). Urinary creatinine was used to normalize the urinary isoflavone data because 24-hour urinary excretion volume was unknown. The Kansas City VAMC determined urinary creatinine excretion using a kinetic alkaline picrate method (Abbott 8200, Abbott Laboratories, Abbott Park, IL).

Because the isoflavone supplement provided proportionally more daidzein than isoflavone supplements derived from whole soybeans, urinary daidzein concentrations were used to determine intervention compliance. Those consuming placebo capsules were considered non-compliant if their adjusted urinary daidzein concentration exceeded 10 nM/mL. This level was chosen based on a natural cutoff-point as well as normal concentrations found in the United States. Those consuming soy supplement capsules that had low urinary daidzein levels were considered compliant as these reduced levels were likely related to non per os (NPO), or nothing by mouth, status prior to surgery. Equol producer status was classified according to a published method (53).

### ***Prostate tissue collection and analysis***

Prostate tissue samples were obtained from patients at the Kansas City VAMC. The urological surgeon obtained core samples of both tumor and adjacent normal prostate tissue during the prostatectomy procedure. The samples were immediately snap-frozen, stored in liquid nitrogen, and transferred to KUMC by the KUMC biospecimen repository team, where Dr. Ossama Tawfik (University of Kansas Medical Center, Kansas City, KS) reviewed and graded each core specimen in order to ensure the



presence of tumor or normal tissue. Samples were stored at -80°C and were transferred to liquid nitrogen prior to RNA isolation and sequencing.

### ***RNA sequencing***

Total RNA was isolated from 6 normal/tumor pairs of flash-frozen prostate tissue samples from 6 participants at KUMC using TRIzol® reagent with Phase Lock GelHeavy (54). These 6 participants were chosen because they had normal/tumor pairs in inventory (**Table 1**). Depending on the amount of biopsy available, between 20-50 mg of tissue were used for total RNA isolation. The tissue was homogenized with 0.8-1 ml TRIzol® reagent (50-100 mg tissue). The cell lysate was added to pre-spun Phase Lock GelHeavy tubes and incubated for 5 minutes at 25°C. Chloroform was added to the tubes at 0.2 ml chloroform per 1 ml TRIzol® reagent and tubes were centrifuged at no more than 12,000 x g for 10 minutes at 4°C. The aqueous phase containing the RNA was transferred to a fresh tube. RNA was precipitated by adding 0.5 ml isopropyl alcohol per 1 ml TRIzol® reagent used initially. Samples were mixed by repeated inversion, incubated at 25°C for 10 minutes, and centrifuged for 10 minutes at no more than 12,000 x g at 4°C. The supernatant was decanted, and 1 ml 75% ethanol per 1 ml TRIzol® reagent was added to wash the RNA pellet. The samples were mixed to dislodge the pellet and were centrifuged at no more than 7,500 x g for 5 minutes at 4°C. The supernatant was again decanted. The RNA pellets were air-dried for 5-10 minutes to remove any residual ethanol, dissolved in molecular biology grade water, and incubated at 55°C for 10 minutes to facilitate dissolution.

Total RNA extracted from the samples was multiplexed (3 samples per lane) and sequenced at a 50 bp paired-end resolution using Illumina® HiSeq® 2500 Sequencing System (University of Kansas Medical Center Genomics Core, Kansas City, KS). Total RNA (0.5 µg) was used to initiate the RNA sequencing library preparation protocol (55). The mRNA fraction was enriched, sized, reverse-transcribed into cDNA and ligated with the appropriate indexed adaptors using Illumina® TruSeq™ RNA Sample Preparation Kit v2 (Illumina RS-122-2001/2002). Following Agilent 2100 Bioanalyzer QC, the libraries were adjusted to a 2 nM concentration and pooled for multiplexed sequencing. Libraries were denatured and diluted to 13 pM followed by clonal clustering onto the sequencing flow cell using the TruSeq™ Paired-End (PE) Cluster Kit v3-cBOT-HS (Illumina PE401-3001). The clonal clustering procedure was automated using the Illumina® cBOT Cluster Station. The clustered flow cell was sequenced on the Illumina® HiSeq® 2500 Sequencing System using the TruSeq™ SBS Kit v3-HS (Illumina FC401-3002).

Following collection, RNA sequencing data were converted from .bcl file format to FastQ files and de-multiplexed into individual sequences (University of Kansas Medical Center Bioinformatics Core, Kansas City, KS). A secure FTP site was created and the data were made available for download. Short reads were quality assessed using FastQC (Version 0.10.1, Babraham Bioinformatics, Cambridge, United Kingdom) (56), a quality control tool for raw high throughput sequence data. Short reads were mapped to the GRCh37 assembly (UCSC name: hg19) using TopHat (Version 2.0.8b, Center for Bioinformatics and Computational Biology, College Park, MD) (57), a fast splice junction mapper for RNA-Seq reads that aligns RNA-Seq reads to mammalian-sized genomes and

analyzes mapping results to identify splice junctions between exons. Read alignments were quality assessed using sam-stats (October 2012) (58), a tool used for computing statistics from SAM or BAM files, and RNA-SeQC (Version 1.1.7) (59), a program that computes a series of quality control metrics for RNA-seq data. Read counting was performed using htseq-count (Version 0.5.4p2) (60). Gene annotation files were downloaded from Ensembl 70 (Feb 2013 release) (61).

### ***Statistical Analysis***

Separate analyses were carried out for tumor data and normal data. The results of the two analyses were further summarized using the set of differentially expressed genes commonly expressed in both normal and tumor tissues. Any gene that had zero mapped reads for all six samples were removed. Because RNA sequencing data is count data, discrete probability distribution based models were used to analyze the data. Because one of the characteristics of RNA sequencing data is that observed variation is greater than the mean, negative binomial distribution was used.

Normalization was performed to adjust for varying sequencing depths and potentially other technical effects across replicates. The trimmed mean of the M values method (TMM, where  $M = \log_2$  fold change) was used to calculate the normalization factor. Quantile-adjusted conditional maximum likelihood (qCML) method was used for estimating common dispersion across all genes. Then, exact test with a negative binomial distribution was used to calculate expression differences between the soy and placebo groups. Multiple test adjustments were carried out using the false discovery

rate (FDR) using Benjamini and Hochberg's method. The analyses were carried out using R version 3.0. Bioconductor Package edgeR (R Core Team, Vienna, Austria) was used to complete the analyses (62). An FDR value of  $< 0.05$  was considered statistically significant. Statistical analysis was conducted by Dr. Prabhakar Chalise (University of Kansas Medical Center Department of Biostatistics, Kansas City, KS).

### ***Bioinformatics***

Pathway analysis used Ingenuity Pathway Analysis (IPA) (Ingenuity® Systems, [www.ingenuity.com](http://www.ingenuity.com)) for all differentially expressed genes (FDR  $< 0.05$ ). To determine if differentially expressed genes were relevant to the prostate cancer disease process, each set of differentially expressed genes (genes in tumor and normal tissue and the common genes shared between normal and tumor samples) were uploaded into IPA. The canonical pathways and molecules for each set of differentially expressed genes were downloaded from IPA. The top canonical pathways and molecules for comparison analyses were also downloaded from IPA.

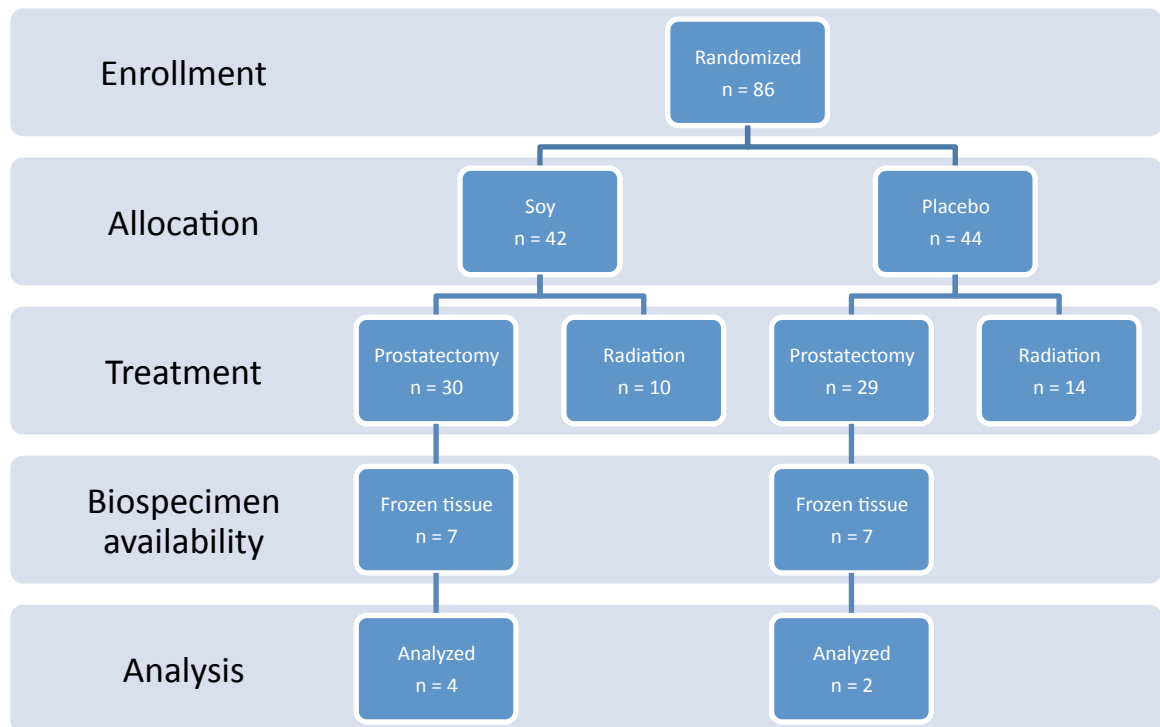
### ***Electronic medical record abstraction***

Clinical outcome data were abstracted from electronic medical records (EMR) at the Kansas City VAMC. Patient charts were reviewed for demographic information, treatment modalities and complications, clinical and pathological staging, Gleason score, comorbidities, PSA, biochemical recurrence, follow-up status, and survival status.

**Data collection**

Baseline demographic information, clinical outcome data, and the results of subsequent biospecimen analyses have already been collected and reported on this sample (63). All data received from urinalysis, tissue analysis, and EMR abstraction were collected and maintained using Research Electronic Data Capture (REDCap version 5.3.4) hosted on a HIPAA-certified server at the University of Kansas. RNA sequencing results were de-identified, exported into Microsoft® Excel spreadsheets, and stored on a secure drive on the KUMC campus. IPA results were de-identified, exported into Microsoft® Excel spreadsheets and jpeg files, and stored on secure computers.

**Figure 1. Participant flow diagram.** The figure shows the current study's participants relationship to the parent study's participants.



## CHAPTER IV: RESULTS

### Subject characteristics

Of the 86 men originally randomized in the parent study, 42 were allocated to receive soy isoflavone supplementation and 44 were allocated to receive the matching placebo capsule. Of the 42 men supplemented with soy isoflavones, 30 men (71%) underwent radical prostatectomy; 29 men (66%) underwent radical prostatectomy in the placebo group. Two men, one from each treatment group, chose active surveillance in lieu of surgery or radiation therapy. Tissue was collected from 14 of the 59 men who chose surgery. In some cases, the tumor was too small or the KUMC biospecimen repository team missed the tumor in collection. Out of the 14 tissue samples, only 6 had adequate normal/tumor pairs (**Table 1, Table 2**).

Therefore, only 6 prostate tissue samples were used for analysis: 4 from men who received isoflavone supplementation, and 2 from men who received placebo. Baseline characteristics of the subset (n = 6) appear in **Table 3**.

### Urinary isoflavone levels

Urine samples from all 6 participants were analyzed for urinary isoflavone and isoflavone metabolite concentrations to indicate compliance with the supplementation protocol (**Table 4**). All 6 participants were compliant with the protocol. Data on equol production were known for all 6 participants included in the analysis. Out of the 4 participants taking soy supplements, only Patient No. 2 was an equol producer according to the equol-to-daidzein ratio  $>0.018$  definition (53).

## Differential gene expression

A total of 62,069 genes were obtained from the RNA sequencing data. In the 6 tumor tissue samples, 20,209 genes had zero mapped reads for all samples. These were removed from analysis, leaving 41,860 genes for analysis. Of these, 128 genes were found to be differentially expressed between soy and placebo in the tumor tissue samples. Out of the 128 differentially expressed genes, 93 were down-regulated and 35 were up-regulated in the soy group when compared to the placebo group (**Table 5, Table 6**). Of these 128 differentially expressed genes, 108 were expressed only in tumor tissue (**Table 7, Table 8**).

In the 6 normal tissue samples, 16,471 genes had zero mapped reads for all samples, leaving 45,598 genes for the analysis. Of these, 186 were found to be differentially expressed between soy and placebo groups in the normal tissue samples. Out of the 186 differentially expressed genes, 147 were down-regulated and 39 were up-regulated in the soy group when compared to the placebo group (**Table 9, Table 10**). Of these 186 differentially expressed genes, 166 were expressed only in normal tissue (**Table 11, Table 12**).

A comparison of the 128 differentially expressed genes in tumor tissue samples to the 186 differentially expressed genes in normal tissue samples revealed 20 genes in common between the two groups (**Table 13**). Of the 20 genes expressed in both tissues, 11 were down-regulated and 9 were up-regulated in normal tissue. Similarly, 11 were down-regulated and 9 were up-regulated in tumor tissue. The regulation direction of



only 2 of the 20 genes differed between normal and tumor tissue (**Table 14, Table 15, Table 16**).

## Pathway analyses

### *Tumor tissue*

The top five canonical pathways enriched for the 128 differentially expressed genes in tumor tissue were: extrinsic prothrombin activation pathway (2 of the 128 genes were in the list of 16 genes within the pathway;  $p = 2.56 \times 10^{-3}$  for enrichment of pathway), human embryonic stem cell pluripotency (4 of the 128 genes were in the list of the 149 genes within the pathway;  $p = 3.6 \times 10^{-3}$  for enrichment of pathway), intrinsic prothrombin activation pathway (2 of the 128 genes were in the list of 32 genes within the pathway;  $p = 7.78 \times 10^{-3}$  for enrichment of pathway), acute phase response signaling (4 of the 128 genes were in the list of 173 genes within the pathway;  $p = 8.39 \times 10^{-3}$  for enrichment of pathway), and the complement system (2 of the 128 genes were in the list of 33 genes within the pathway;  $p = 1.01 \times 10^{-2}$  for enrichment of pathway) (**Table 17, Figure 2**).

The 2 differentially expressed genes up-regulated by soy isoflavones within extrinsic prothrombin activation and intrinsic prothrombin activation were FGA ( $p = 4.28 \times 10^{-5}$ ) and FGB ( $p = 2.78 \times 10^{-7}$ ) (**Figure 3**). The 4 differentially expressed genes within human embryonic stem cell pluripotency were BMP5 (down-regulated;  $p = 6.66 \times 10^{-16}$ ), NANOG (down-regulated;  $p = 1.40 \times 10^{-4}$ ), WNT2 (down-regulated;  $p = 9.60 \times 10^{-6}$ ), and ZIC3 (up-regulated;  $p = 1.29 \times 10^{-4}$ ) (**Figure 3**). The 4 differentially expressed genes within

acute phase signaling were FGA (up-regulated;  $p = 4.28 \times 10^{-5}$ ), FGB (up-regulated;  $p = 2.78 \times 10^{-7}$ ), LBP (down-regulated;  $p = 1.07 \times 10^{-4}$ ), and RBP4 (down-regulated;  $p = 1.46 \times 10^{-6}$ ) (**Figure 3**). The 2 differentially expressed genes within the complement system were CFD (down-regulated;  $p = 9.99 \times 10^{-5}$ ) and CR2 (down-regulated;  $p = 2.54 \times 10^{-8}$ ) (**Figure 3**).

### ***Normal tissue***

The top five canonical pathways enriched for the 186 differentially expressed genes in normal tissue were: the role of IL-17A in psoriasis (2 of the 186 genes were in the list of 13 genes within the pathway;  $p = 1.10 \times 10^{-3}$  for enrichment of pathway), the methylglyoxal degradation VI pathway (1 of the 186 genes were in the list of 1 gene within the pathway;  $p = 3.84 \times 10^{-3}$  for enrichment of pathway), glutamate dependent acid resistance (1 of the 186 genes were in the list of 2 genes within the pathway;  $p = 7.67 \times 10^{-3}$  for enrichment of pathway), GABA receptor signaling (2 of the 186 genes were in the list of 46 genes within the pathway;  $p = 1.35 \times 10^{-2}$  for enrichment of pathway), and protein citrullination (1 of the 186 genes were in the list of 5 genes within the pathway;  $p = 1.91 \times 10^{-2}$  for enrichment of pathway) (**Table 18, Figure 4**).

The 2 differentially expressed genes up-regulated by soy isoflavones within the role of IL-17A in psoriasis were CXCL5 ( $p = 3.54 \times 10^{-6}$ ) and S100A7 ( $p = 1.55 \times 10^{-5}$ ) (**Figure 5**). The differentially expressed gene down-regulated by soy isoflavones within the methylglyoxal degradation VI pathway was LDHD ( $p = 6.06 \times 10^{-5}$ ) (**Figure 5**). The differentially expressed gene down-regulated by soy isoflavones within glutamate dependent acid resistance was GAD2 ( $p = 2.92 \times 10^{-14}$ ) (**Figure 5**). The 2 differentially

expressed genes down-regulated by soy isoflavones within GABA receptor signaling were GABRA4 ( $p = 7.79 \times 10^{-5}$ ) and GAD2 ( $p = 2.92 \times 10^{-14}$ ) (**Figure 5**). The differentially expressed gene down-regulated by soy isoflavones within protein citrullination was PADI3 ( $p = 1.04 \times 10^{-4}$ ) (**Figure 5**).

### ***Overlapping pathways***

The top five canonical pathways enriched for the 20 differentially expressed genes in common between normal and tumor tissue were: extrinsic prothrombin activation pathway (1 of the 20 genes were in the list of 16 genes within the pathway;  $p = 7.28 \times 10^{-3}$  for enrichment of pathway), thyroid hormone metabolism II (1 of the 20 genes were in the list of 26 genes within the pathway;  $p = 1.18 \times 10^{-2}$  for enrichment of pathway), intrinsic prothrombin activation pathway (1 of the 20 genes were in the list of 32 genes within the pathway;  $p = 1.27 \times 10^{-2}$  for enrichment of pathway), the coagulation system (1 of the 20 genes were in the list of 35 genes within the pathway;  $p = 1.59 \times 10^{-2}$  for enrichment of pathway), and nicotine degradation III (1 of the 20 genes were in the list of 45 genes within the pathway;  $p = 2.03 \times 10^{-2}$  for enrichment of pathway) (**Table 19, Figure 6**).

The 2 differentially expressed genes up-regulated by soy isoflavones were FGB and UGT2B4 (**Table 20**). The differentially expressed gene up-regulated by soy isoflavones within the extrinsic prothrombin activation pathway was FGB ( $p = 2.78 \times 10^{-7}$  in tumor tissue;  $p = 1.11 \times 10^{-6}$  in normal tissue). The differentially expressed gene up-regulated by soy isoflavones within the thyroid hormone metabolism II pathway was

UGT2B4 ( $p = 4.06 \times 10^{-5}$  in tumor tissue;  $p = 1.68 \times 10^{-6}$  in normal tissue). The differentially expressed gene up-regulated by soy isoflavones in the intrinsic prothrombin activation pathway was FGB ( $p = 2.78 \times 10^{-7}$  in tumor tissue;  $p = 1.11 \times 10^{-6}$  in normal tissue). The differentially expressed gene up-regulated by soy isoflavones within the coagulation system was FGB ( $p = 2.78 \times 10^{-7}$  in tumor tissue;  $p = 1.11 \times 10^{-6}$  in normal tissue). The differentially expressed gene up-regulated by soy isoflavones within the nicotine degradation III was UGT2B4 ( $p = 4.06 \times 10^{-5}$  in tumor tissue;  $p = 1.68 \times 10^{-6}$  in normal tissue).

#### **Electronic medical record data**

Clinical follow-up data abstracted from electronic medical records appears in **Table 21**. Pathological staging indicated T2A to T3A (IIA to III) prostate cancer. Only one subject had invasion of the lymph nodes. No subjects experienced metastatic disease. No patient experienced biochemical recurrence, though one patient experienced persistent disease.

**Table 1. Biospecimen inventory of study sample**

Patient	ID No.	Treatment	Frozen tissue		Urine
			Normal	Tumor	
1	07	SOY	X	X	X
2	34	SOY	X	X	X
3	36	PLACEBO	X	X	X
4	37	SOY	BPH	X	X
5	38	PLACEBO	X	X	X
6	50	SOY	X	X	X

Patient No. 4 (ID #37): normal tissue contained benign prostatic hyperplasia (BPH) cells, a benign condition.

**Table 2. Frozen prostate tissue in total inventory**

	<b>ID No.</b>	<b>Treatment</b>	<b>Normal</b>	<b>Tumor</b>	<b>Normal/tumor tissue pairs</b>
1	01	PLACEBO	0	LYSATE	No, lysate only
2	02	PLACEBO	0	0	No, no samples in inventory
3	04	SOY	0	0	No, no samples in inventory
4	06	SOY	0	0	No, no samples in inventory
5	07	SOY	1	1	Yes
6	08	PLACEBO	0	0	No, no samples in inventory
7	11	PLACEBO	0	0	No, no samples in inventory
8	31	SOY	2	0	No, no normal tissue in inventory
9	33	PLACEBO	LYSATE	LYSATE	No, lysate only
10	34	SOY	1	1	Yes
11	36	PLACEBO	1	1	Yes
12	37	SOY	BPH	1	Yes, BPH is a benign condition
13	38	PLACEBO	1	1	Yes
14	50	SOY	1	1	Yes

BPH, benign prostatic hyperplasia

**Table 3. Baseline characteristics of study sample**

<b>Patient, No.</b>	1	2	3	4	5	6
<b>ID No.</b>	07	34	36	37	38	50
<b>Treatment</b>	SOY	SOY	PLACEBO	SOY	PLACEBO	SOY
<b>Age, yr</b>	69	75	62	61	63	59
<b>Race</b>	White	White	White	White	White	White
<b>Ethnicity</b>	Non-Hispanic	Non-Hispanic	Non-Hispanic	Non-Hispanic	Non-Hispanic	Non-Hispanic
<b>Weight, lbs</b>	182	148	209	152	216	245
<b>Height, in</b>	68	68	71	68	70	67
<b>BMI, kg/m<sup>2</sup></b>	27.7	22.5	29.2	23.1	30.8	38.4
<b>PSA, ng/mL</b>	10.9	5.6	4.1	21.6	7.3	9.5
<b>Clinical stage</b>	T2A	T2A	T2C	T2A	T2A	T1C
<b>Gleason score</b>	7	9	7	7	6	7
<b>Approach</b>	RRP	RRP	RRP	RRP	RRP	RRP
<b>Concurrent ADT</b>	NO	NO	NO	YES	NO	NO
<b>Complications</b>	NO	NO	NO	NO	NO	NO
<b>Compliant</b>	YES	YES	YES	YES	YES	YES
<b>Equol producer</b>	YES	NO	PLACEBO	NO	PLACEBO	NO

BMI, body mass index; PSA, prostate specific antigen; RRP, radical retropubic prostatectomy

**Table 4. Urinary isoflavone concentrations (nmol/L) of study sample**

<b>Patient ID No.</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
<b>Treatment</b>	SOY	SOY	PLACEBO	SOY	PLACEBO	SOY
<b>Genistein</b>	2.551	5.843	0.112	1.370	0.029	12.533
<b>Adjusted genistein</b>	2.278	5.745	0.093	2.630	0.027	ND
<b>Daidzein</b>	19.091	44.402	0.291	12.839	0.042	98.164
<b>Adjusted daidzein</b>	17.046	43.660	0.241	24.642	0.039	ND
<b>Glycitein</b>	4.617	17.350	0.124	10.240	0.029	ND
<b>Adjusted glycitein</b>	4.122	17.350	0.124	10.240	0.029	22.276
<b>ODMA</b>	0.184	12.307	0.011	2.969	ND	1.158
<b>Adjusted ODMA</b>	0.164	12.307	0.009	5.700	ND	ND
<b>DHD</b>	6.560	10.252	0.117	4.835	0.026	4.577
<b>Adjusted DHD</b>	5.858	10.081	0.097	9.280	0.024	ND
<b>Equol</b>	24.073	0.028	0.011	0.018	ND	ND
<b>Equol:daidzein</b>	1.261	0.001	0.039	0.001	ND	ND
<b>Equol producer</b>	YES	NO	PLACEBO	NO	PLACEBO	NO
<b>Creatinine (mg/dL)</b>	112	101.7	120.6	52.1	107.8	ND

ND, no data; ODMA, O-desmethylangolensin; DHD, dihydrodaizein



**Table 5.** Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 128 differentially expressed genes from tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000112175	BMP5	Bone morphogenetic protein 5	6	55618443	55740362	234	6.66E-16	2.79E-11
2	ENSG00000170290	SLN	Sarcolipin	11	107578104	107590419	269	2.37E-14	4.72E-10
3	ENSG00000156234	CXCL13	Chemokine (C-X-C motif) ligand 13	4	78432907	78532988	129	3.39E-14	4.72E-10
4	ENSG00000254851	RP11-109L13.1		11	117006244	117009298	340	4.88E-14	5.11E-10
5	ENSG00000181617	FDCSP	Follicular dendritic cell secreted protein	4	71091788	71100969	104	3.68E-11	2.74E-07
6	ENSG00000145681	HAPLN1	Hyaluronan and proteoglycan link protein 1	5	82933624	83017432	60	3.93E-11	2.74E-07
7	ENSG00000131094	C1QL1	Complement component 1, q subcomponent-like 1	17	43037061	43045439	49	2.15E-10	1.12E-06
8	ENSG00000237250	RP11-193H5.1		1	238025475	238091621	350	6.88E-10	3.20E-06
9	ENSG00000171201	SMR3B	Submaxillary gland androgen regulated protein 3B	4	71235810	71255961	67	1.73E-09	7.24E-06
10	ENSG00000164879	CA3	Carbonic anhydrase III, muscle specific	8	86285665	86361269	35	3.96E-09	1.51E-05
11	ENSG00000075043	KCNQ2	Potassium voltage-gated channel, KQT-like subfamily, member 2	20	62037542	62103993	32	5.51E-09	1.92E-05
12	ENSG00000101204	CHRNA4	Cholinergic receptor, nicotinic, alpha 4 (neuronal)	20	61975420	62009753	56	7.95E-09	2.56E-05
13	ENSG00000184374	COLEC10	Collectin sub-family member 10 (C-type lectin)	8	120007691	120118821	40	9.49E-09	2.84E-05
14	ENSG00000171446	KRT27	Keratin 27	17	38933060	38938786	60	1.87E-08	5.21E-05
15	ENSG00000258027	RP11-597A11.1		14	20078033	20146082	31	2.20E-08	5.76E-05

16	ENSG00000117322	CR2	Complement component (3d/Epstein Barr virus) receptor 2	1	207627575	207663240	29	2.54E-08	6.25E-05
17	ENSG00000185742	C11orf87	Chromosome 11 open reading frame 87	11	109292846	109299840	58	3.47E-08	8.04E-05
18	ENSG00000197616	MYH6	Myosin, heavy chain 6, cardiac muscle, alpha	14	23851199	23877486	28	3.68E-08	8.04E-05
19	ENSG00000164616	FBXL21	F-box and leucine-rich repeat protein 21	5	135266006	135287280	28	3.84E-08	8.04E-05
20	ENSG00000121075	TBX4	T-box 4	17	59529765	59562471	23	8.97E-08	0.00017071
21	ENSG00000253400	RP11-337A23.6		9	26801731	26805860	181	1.13E-07	0.00020532
22	ENSG00000253998	IGKV2-29	Immunoglobulin kappa variable 2-29	2	89533655	89534393	174	1.35E-07	0.00023415
23	ENSG00000266554	RP11-537H14.2		18	14946266	14973769	78	1.40E-07	0.00023415
24	ENSG00000185668	POU3F1	POU class 3 homeobox 1	1	38509523	38512450	23	1.53E-07	0.00024649
25	ENSG00000184613	NELL2	NEL-like 2 (chicken)	12	44902058	45315631	19	3.99E-07	0.0005937
26	ENSG00000184258	CDR1	Cerebellar degeneration-related protein 1, 34kDa	X	139865425	139866723	67	4.59E-07	0.00062761
27	ENSG00000188778	ADRB3	Adrenoceptor beta 3	8	37820516	37824483	22	4.65E-07	0.00062761
28	ENSG00000104921	FCER2	Fc fragment of IgE, low affinity II, receptor for (CD23)	19	7753644	7767032	22	5.60E-07	0.00072277
29	ENSG00000257357	RP11-244H18.3		14	20105463	20109540	24	5.87E-07	0.00072277
30	ENSG00000130600	H19	H19, imprinted maternally expressed transcript (non-protein coding)	11	2016406	2022700	18	6.06E-07	0.00072277
31	ENSG00000257432	RP11-244H18.4		14	20097282	20098616	22	6.22E-07	0.00072277
32	ENSG00000224521	RP11-438F14.3		1	248712057	248727140	134	9.94E-07	0.00109547
33	ENSG00000102683	SGCG	Sarcoglycan, gamma (35kDa dystrophin-associated protein)	13	23755091	23899304	17	1.06E-06	0.00113499

34	ENSG00000141744	PNMT	Phenylethanolamine N-methyltransferase	17	37824234	37826728	17	1.19E-06	0.00124436
35	ENSG00000138207	RBP4	Retinol binding protein 4, plasma	10	95351444	95361501	16	1.46E-06	0.00145278
36	ENSG00000263556	RN7SL383P	RNA, 7SL, cytoplasmic 383, pseudogene	5	44716292	44716587	130	1.57E-06	0.00153224
37	ENSG00000179455	MKRN3	Makorin ring finger protein 3	15	23810454	23873064	23	1.73E-06	0.00164774
38	ENSG00000181072	CHRM2	Cholinergic receptor, muscarinic 2	7	136553416	136705002	33	1.83E-06	0.00170513
39	ENSG00000260125	RP11- 31E22.1		15	86838880	86860404	40	2.03E-06	0.0018495
40	ENSG00000255399	TBX5-AS1	TBX5 antisense RNA 1	12	114845996	114850636	16	2.42E-06	0.00215714
41	ENSG00000170054	SERPINA9	Serpin peptidase inhibitor, clade A (alpha-1 antitrypsin)	14	94929054	94946026	118	2.55E-06	0.00218999
42	ENSG00000019169	MARCO	Macrophage receptor with collagenous structure	2	119699742	119752236	15	2.62E-06	0.00219449
43	ENSG00000100427	MLC1	Megalencephalic leukoencephalopathy with subcortical cysts 1	22	50497820	50524331	14	3.78E-06	0.00304331
44	ENSG00000162989	KCNJ3	Potassium inwardly- rectifying channel, subfamily J, member 3	2	155554811	155714863	14	4.62E-06	0.00360292
45	ENSG00000118231	CRYGD	Crystallin, gamma D	2	208986331	208989225	49	4.79E-06	0.00364794
46	ENSG00000173976	RAX2	Retina and anterior neural fold homeobox 2	19	3769087	3772233	109	5.56E-06	0.00408458
47	ENSG00000228408	RP1-111D6.3		6	149539062	149565208	106	5.56E-06	0.00408458
48	ENSG00000249201	CTD- 3080P12.3		5	1173256	1178720	102	7.32E-06	0.00504856
49	ENSG00000185002	RFX6	Regulatory factor X, 6	6	117198375	117253326	15	7.36E-06	0.00504856
50	ENSG00000105989	WNT2	Wingless-type MMTV integration site family member 2	7	116916685	116963343	12	9.60E-06	0.00648123
51	ENSG00000261076	RP11- 179B15.6		10	66085374	60086790	43	1.14E-05	0.00732234

52	ENSG00000228294	AL589743.2		14	19670480	19686002	26	1.23E-05	0.00777982
53	ENSG00000257162	RP11-244H18.2		14	20071068	20074896	93	1.30E-05	0.00814965
54	ENSG00000234184	RP5-887A10.1		1	81001440	81112473	14	1.36E-05	0.00839273
55	ENSG00000181195	PENK	Proenkephalin	8	57349233	57359293	12	1.51E-05	0.00916479
56	ENSG00000235743	RP11-439H9.1		6	23337939	23346788	92	1.77E-05	0.01026902
57	ENSG00000238773	AL137855.1		1	58222756	58222848	92	1.77E-05	0.01026902
58	ENSG00000211892	IGHG4	Immunoglobulin heavy constant gamma 4 (G4m marker)	14	106090687	106092403	11	2.08E-05	0.0118659
59	ENSG00000188176	SMTNL2	Smoothelin-like 2	17	4487294	4511614	12	2.10E-05	0.0118659
60	ENSG00000211670	IGLV3-9	Immunoglobulin lambda variable 3-9	22	23161507	23162253	12	2.30E-05	0.01283791
61	ENSG00000174482	LINGO2	Leucine rich repeat and Ig domain containing 2	9	27948076	28670283	12	2.65E-05	0.01439979
62	ENSG00000123572	NRK	Nik related kinase	X	105066536	105202602	10	3.94E-05	0.02086231
63	ENSG00000188000	OR7D2	Olfactory receptor, family 7, subfamily D, member 2	19	9296279	9299493	14	4.09E-05	0.02088368
64	ENSG00000139767	SRRM4	Serine/arginine repetitive matrix 4	12	119419300	119600856	14	4.20E-05	0.02116363
65	ENSG00000171189	GRIK1	Glutamate receptor, ionotropic, kainate 1	21	30909254	31312351	10	4.36E-05	0.021459
66	ENSG00000149295	DRD2	Dopamine receptor D2	11	113280318	113346413	10	4.60E-05	0.02179889
67	ENSG00000260412	RP11-438B23.2		9	27937615	27944495	15	5.25E-05	0.02439748
68	ENSG00000259384	GH1	Growth hormone 1	17	61994560	61996179	25	5.68E-05	0.02585888
69	ENSG00000234665	RP11-262H14.3		9	66513488	66553911	14	5.86E-05	0.0263856

70	ENSG00000255760	RP11-428G5.5		12	32030013	32040137	13	5.99E-05	0.02656543
71	ENSG00000130700	GATA5	GATA binding protein 5	20	61038553	61051026	10	6.08E-05	0.02656543
72	ENSG00000154016	GRAP	GRB2-related adaptor protein	17	18923986	18950950	74	6.66E-05	0.02819966
73	ENSG00000186207	LCE5A	Late cornified envelope 5A	1	152483320	152484653	71	6.66E-05	0.02819966
74	ENSG00000163534	FCRL1	Fc receptor-like 1	1	157764193	157789895	10	6.67E-05	0.02819966
75	ENSG00000101440	ASIP	Agouti signaling protein	20	32782375	32857150	10	7.24E-05	0.03002326
76	ENSG00000234931	MARK2P15	MAP/microtubule affinity-regulating kinase 2 pseudogene 15	10	85071384	85074231	29	7.24E-05	0.03002326
77	ENSG00000234224	TMEM229A	Transmembrane protein 229A	7	123670973	123673523	11	7.46E-05	0.0300731
78	ENSG00000175513	TSGA10IP	Testis specific, 10 interacting protein	11	65712916	65727434	13	7.54E-05	0.0300731
79	ENSG00000233403	RP11-86A5.1		X	25896456	25911661	31	8.60E-05	0.03387416
80	ENSG00000254278	RP11-278I4.2		8	120075181	120081021	71	9.59E-05	0.03616201
81	ENSG00000231882	F10-AS1	F10 antisense RNA 1	13	113782469	113783194	67	9.59E-05	0.03616201
82	ENSG00000229231	FEM1AP1	Fem-1 homolog a (C. elegans) pseudogene 1	21	15134659	15136653	67	9.59E-05	0.03616201
83	ENSG00000197766	CFD	Complement factor D (adipsin)	19	859453	863569	9	9.99E-05	0.03698971
84	ENSG00000100433	KCNK10	Potassium channel, subfamily K, member 10	14	88649113	88793251	13	0.00010074	0.03698971
85	ENSG00000170356	OR2A20P	Olfactory receptor, family 2, subfamily A, member 20 pseudogene	7	143947138	143950050	12	0.00010074	0.03698971
86	ENSG00000129988	LBP	Lipopolysaccharide binding protein	20	36974759	37005665	11	0.00010695	0.038504
87	ENSG00000213424	KRT222	Keratin 222	17	38810917	38821433	10	0.00010762	0.038504

88	ENSG00000260896	RP11-314O13.1		16	80862632	80926492	9	0.00011354	0.04027704
89	ENSG00000230229	RP11-90J7.4		10	80112354	80115857	14	0.00012331	0.04266026
90	ENSG00000110675	ELMOD1	ELMO/CED-12 domain containing 1	11	107461817	107537505	9	0.00012445	0.04270224
91	ENSG00000121270	ABCC11	ATP-binding cassette, subfamily C (CFTR/MRP), member 11	16	48200821	48281479	9	0.00013328	0.04499134
92	ENSG00000259761	RP11-138H10.2		15	87585285	87590392	64	0.00014028	0.04660497
93	ENSG00000111704	NANOG	NANOG homeobox	12	7940390	7948655	62	0.00014028	0.04660497

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 6. Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 128 differentially expressed genes from tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)**

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000164266	SPINK1	Serine peptidase inhibitor, Kazal type 1	5	147204131	147211349	518	9.04E-11	5.41E-07
2	ENSG00000052850	ALX4	ALX homeobox 4	11	44281994	44331716	131	5.59E-08	0.0001115
3	ENSG00000171564	FGB	Fibrinogen beta chain	4	155484108	155492238	222	2.78E-07	0.00043134
4	ENSG00000204612	FOXB2	Forkhead box B2	9	79634571	79635869	662	4.11E-07	0.0005937
5	ENSG00000233760	AC004947.2		7	26591441	26596819	68	5.90E-07	0.00072277
6	ENSG00000144355	DLX1	Distal-less homeobox 1	2	172949468	172954405	66	7.26E-07	0.00082111
7	ENSG00000007306	CEACAM7	Carcinoembryonic antigen-related cell adhesion molecule 7	19	42177235	42210895	63	1.42E-06	0.00145162
8	ENSG00000170369	CST2	Cystatin SA	20	23804406	23807368	45	2.56E-06	0.00218999
9	ENSG00000096006	CRISP3	Cysteine-rich secretory protein 3	6	49695097	49712150	44	3.69E-06	0.00302595
10	ENSG00000226278	PSPHP1	Phosphoserine phosphatase pseudogene 1	7	55832490	55840981	116	4.65E-06	0.00360292
11	ENSG00000171759	PAH	Phenylalanine hydroxylase	12	103230663	103352188	36	6.65E-06	0.00479909
12	ENSG00000126733	DACH2	Dachshund homolog 2 (Drosophila)	X	85403462	86087607	36	7.24E-06	0.00504856
13	ENSG00000240045	RP11-451G4.2		3	155008018	155011564	48	1.02E-05	0.00680086
14	ENSG00000227560	RP11-139K1.2		10	114747235	114747624	46	1.12E-05	0.00732234
15	ENSG00000170373	CST1	Cystatin SN	20	23728190	23731905	29	1.67E-05	0.00996704

16	ENSG00000153294	GPR115	G protein-coupled receptor 115	6	47653600	47689757	40	2.42E-05	0.01331627
17	ENSG00000254349	RP11-758M4.1		8	75512010	75735548	29	3.75E-05	0.02015023
18	ENSG00000156096	UGT2B4	UDP glucuronosyltransferase 2 family, polypeptide R4	4	70345883	70391732	28	4.06E-05	0.02088368
19	ENSG00000134443	GRP	Gastrin-releasing peptide	18	56887400	56898006	25	4.08E-05	0.02088368
20	ENSG00000171560	FGA	Fibrinogen alpha chain	4	155504278	155511918	225	4.28E-05	0.02134795
21	ENSG00000100665	SERPINA4	Serpin peptidase inhibitor, clade A (alpha-1 antitrypsin)	14	95027428	95036250	63	4.48E-05	0.02179889
22	ENSG00000230327	AC009234.1		2	50815828	50816553	39	4.60E-05	0.02179889
23	ENSG00000172238	ATOH1	Atonal homolog 1 (Drosophila)	4	94750042	94751221	216	4.63E-05	0.02179889
24	ENSG00000170426	SDR9C7	Short chain dehydrogenase/reductase family 9C member 7	12	57316938	57328189	25	5.60E-05	0.02573882
25	ENSG00000154975	CA10	Carbonic anhydrase X	17	49707674	50237377	36	6.09E-05	0.02656543
26	ENSG00000237567	RP3-359N14.2		6	106060542	106080071	24	7.39E-05	0.0300731
27	ENSG00000095627	TDRD1	Tudor domain containing 1	10	115939029	115992063	23	7.52E-05	0.0300731
28	ENSG00000224099	AC064834.1		2	196313256	196343649	31	8.66E-05	0.03387416
29	ENSG00000146039	SLC17A4	Solute carrier family 17 (sodium phosphate)	6	25754927	25781419	27	8.89E-05	0.03447194
30	ENSG00000261045	RP11-673P17.4		16	27169775	27187908	22	0.00010714	0.038504
31	ENSG00000247627	MTND4P12	MT-ND4 pseudogene 12	5	134262350	134263726	18	0.00011453	0.04028588
32	ENSG00000243236	RP1-214M20.2		6	52804524	52822319	18	0.00011768	0.04105023
33	ENSG00000156925	ZIC3	ZIC family member 3	X	136648301	136659850	53	0.00012932	0.04401105



34	ENSG00000128564	VGF	VGF nerve growth factor inducible	7	100805790	100808874	19	0.00014537	0.04791442
35	ENSG00000187416	LHFPL3	Lipoma HMGIC fusion partner-like 3	7	103969104	104549001	21	0.00015021	0.04912182

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 7. Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 108 differentially expressed genes from only tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)**

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000112175	BMP5	Bone morphogenetic protein 5	6	55618443	55740362	234	6.66E-16	2.79E-11
2	ENSG00000170290	SLN	Sarcolipin	11	1.08E+08	1.08E+08	269	2.37E-14	4.72E-10
3	ENSG00000156234	CXCL13	Chemokine (C-X-C motif) ligand 13	4	78432907	78532988	129	3.39E-14	4.72E-10
4	ENSG00000181617	FDCSP	Follicular dendritic cell secreted protein	4	71091788	71100969	104	3.68E-11	2.74E-07
5	ENSG00000145681	HAPLN1	Hyaluronan and proteoglycan link protien 1	5	82933624	83017432	60	3.93E-11	2.74E-07
6	ENSG00000131094	C1QL1	Complement component 1, q subcomponent-like 1	17	43037061	43045439	49	2.15E-10	1.12E-06
7	ENSG00000237250	RP11-193H5.1		1	238025475	238091621	350	6.88E-10	3.20E-06
8	ENSG00000171201	SMR3B	Submaxillary gland androgen regulated protein 3B	4	71235810	71255961	67	1.73E-09	7.24E-06
9	ENSG00000164879	CA3	Carbonic anhydrase III, muscle specific	8	86285665	86361269	35	3.96E-09	1.51E-05
10	ENSG00000075043	KCNQ2	Potassium voltage-gated channel, KQT-like subfamilv.	20	62037542	62103993	32	5.51E-09	1.92E-05
11	ENSG00000101204	CHRNA4	Cholinergic receptor, nicotinic, alpha 4 (neuronal)	20	61975420	62009753	56	7.95E-09	2.56E-05
12	ENSG00000184374	COLEC10	Collectin subfamily member 10	8	120007691	120118821	40	9.49E-09	2.84E-05
13	ENSG00000171446	KRT27	Keratin 27	17	38933060	38938786	60	1.87E-08	5.21E-05
14	ENSG00000117322	CR2	Complement component (3d/Epstein Barr virus) receptor 2	1	207627575	207663240	29	2.54E-08	6.25E-05
15	ENSG00000185742	C11orf87	Chromosome 11 open reading frame 87	11	109292846	109299840	58	3.47E-08	8.04E-05

16	ENSG00000197616	MYH6	Myosin, heavy chain 6, cardiac muscle, alpha	14	23851199	23877486	28	3.68E-08	8.04E-05
17	ENSG00000164616	FBXL21	F-box and leucine-rich repeat protein 21	5	135266006	135287820	28	3.84E-08	8.04E-05
18	ENSG00000253400	RP11-337A23.6		9	26801731	26805860	181	1.13E-07	0.000205318
19	ENSG00000266554	RP11-527H14.2		18	14946266	14973769	78	1.40E-07	0.000234152
20	ENSG00000185668	POU3F1	POU class 3 homeobox 1	1	38509523	38512450	23	1.53E-07	0.000246492
21	ENSG00000184613	NELL2	NEL-like 2 (chicken)	12	44902058	45315631	19	3.99E-07	0.000593697
22	ENSG00000184258	CDR1	Cerebellar degeneration-related protein 1, 34kDa	X	139865425	139866723	67	4.59E-07	0.000627607
23	ENSG00000188778	ADRB3	Adrenoreceptor beta 3	8	37820516	37824483	22	4.65E-07	0.000627607
24	ENSG00000104921	FCER2	Fc fragment of IgE, low affinity II, receptor for (CD23)	19	7753644	7767032	22	5.60E-07	0.00072277
25	ENSG00000130600	H19	H19, imprinted maternally expressed transcript (non-	11	2016406	2022700	18	6.06E-07	0.00072277
26	ENSG00000257432	RP11-244H18.4		14	20097282	20098616	22	6.22E-07	0.00072277
27	ENSG00000224521	RP11-438F14.3		1	248712057	248727140	134	9.94E-07	0.001095466
28	ENSG00000102683	SGCG	Sarcoglycan, gamma (35kDa dystrophin-associated)	13	23755091	23899304	17	1.06E-06	0.001134986
29	ENSG00000141744	PNMT	Phenylethanolamine N-methyltransferase	17	37824234	37826728	17	1.19E-06	0.001244355
30	ENSG00000138207	RBP4	Retinol binding protein 4, plasma	10	95351444	95361501	16	1.46E-06	0.00145278
31	ENSG00000263556	RN7SL383P	RNA, 7SL, cytoplasmic 383, pseudogene	5	44716292	44716587	130	1.57E-06	0.001532245
32	ENSG00000179455	MKRN3	Makorin ring finger protein 3	15	23810454	23873064	23	1.73E-06	0.00164774
33	ENSG00000181072	CHRM2	Cholinergic receptor, muscarinic 2	7	136553416	136705002	33	1.83E-06	0.001705134

34	ENSG00000255399	TBX5-AS1	TBX5 antisense RNA 1	12	114845996	114850636	16	2.42E-06	0.002157141
35	ENSG00000170054	SERPINA9	Serpin peptidase inhibitor, clade A (alpha-1	14	94929054	94946026	118	2.55E-06	0.002189989
36	ENSG00000019169	MARCO	antitrypsinase Macrophage receptor with collagenase structure	2	119699742	119752236	15	2.62E-06	0.002194493
37	ENSG00000100427	MLC1	Megalencephalic leukoencephalopathy with subcortical cysts	22	50497820	50524331	14	3.78E-06	0.003043306
38	ENSG00000162989	KCNJ3	Potassium inwardly-rectifying channel	2	155554811	155714863	14	4.62E-06	0.003602916
39	ENSG00000118231	CRYGD	Crystallin, gamma D	2	208986331	208989225	49	4.79E-06	0.003647939
40	ENSG00000173976	RAX2	Retina and anterior neural fold homeobox 2	19	3769087	3772233	109	5.56E-06	0.00408458
41	ENSG00000228408	RP1-111D6.3		6	149539062	149565208	106	5.56E-06	0.00408458
42	ENSG00000249201	CTD-3080P12.3		5	1173256	1178720	102	7.32E-06	0.005048563
43	ENSG00000185002	RFX6	Regulatory factor X, 6	6	117198375	117253326	15	7.36E-06	0.005048563
44	ENSG00000105989	WNT2	Wingless-type MMTV integration site family member 2	7	116916685	116963343	12	9.60E-06	0.006481232
45	ENSG00000261076	RP11-179B15.6		10	66085374	60086790	43	1.14E-05	0.007322341
46	ENSG00000228294	AL589743.2		14	19670480	19686002	26	1.23E-05	0.00777982
47	ENSG00000257162	RP11-244H18.2		14	20071068	20074896	93	1.30E-05	0.008149649
48	ENSG00000234184	RP5-887A10.1		1	81001440	81112473	14	1.36E-05	0.008392733
49	ENSG00000181195	PENK	Proenkephalin	8	57349233	57359293	12	1.51E-05	0.009164791
50	ENSG00000235743	RP11-439H9.1		6	23337939	23346788	92	1.77E-05	0.010269018
51	ENSG00000238773	AL137855.1		1	58222756	58222848	92	1.77E-05	0.010269018

52	ENSG00000211892	IGHG4	Immunoglobulin heavy constant gamma 4 (G4m marker)	14	106090687	106092403	11	2.08E-05	0.011865899
53	ENSG00000188176	SMTNL2	Smoothelin-like 2	17	4487294	4511614	12	2.10E-05	0.011865899
54	ENSG00000211670	IGLV3-9	Immunoglobulin lambda variable 3-9	22	23161507	23162253	12	2.30E-05	0.012837914
55	ENSG00000174482	LINGO2	Leucine rich repeat and Ig domain containing 2	9	27948076	28670283	12	2.65E-05	0.014399793
56	ENSG00000123572	NRK	NIK related kinase	X	105066536	105202602	10	3.94E-05	0.020862314
57	ENSG00000139767	SRRM4	Serine/arginine repetitive matrix 4	12	119419300	119600856	14	4.20E-05	0.021163626
58	ENSG00000171189	GRIK1	Glutamate receptor, ionotropic, kainate 1	21	30909254	31312351	10	4.36E-05	0.021458998
59	ENSG00000149295	DRD2	Dopamine receptor D2	11	113280318	113346413	10	4.60E-05	0.021798893
60	ENSG00000260412	RP11-438B23.2		9	27937615	27944495	15	5.25E-05	0.024397483
61	ENSG00000259384	GH1	Growth hormone 1	17	61994560	61996179	25	5.68E-05	0.025858877
62	ENSG00000255760	RP11-428G5.5		12	32030013	32040137	13	5.99E-05	0.02656543
63	ENSG00000130700	GATA5	GATA binding protein 5	20	61038553	61051026	10	6.08E-05	0.02656543
64	ENSG00000154016	GRAP	GRB2-related adaptor protein	17	18923986	18950950	74	6.66E-05	0.028199661
65	ENSG00000186207	LCE5A	Late cornified envelope 5A	1	152483320	152484653	71	6.66E-05	0.028199661
66	ENSG00000163534	FCRL1	Fc receptor-like 1	1	157764193	157789895	10	6.67E-05	0.028199661
67	ENSG00000101440	ASIP	Agouti signaling protein	20	32782375	32857150	10	7.24E-05	0.030023263
68	ENSG00000234224	TMEM229A	Transmembrane protein 229A	7	123670973	123673523	11	7.46E-05	0.030073102
69	ENSG00000175513	TSGA10IP	Testis specific, 10 interacting protein	11	65712916	65727434	13	7.54E-05	0.030073102

70	ENSG00000233403	RP11-86A5.1		X	25896456	25911661	31	8.60E-05	0.033874159
71	ENSG00000254278	RP11-278I4.2		8	120075181	120081021	71	9.59E-05	0.036162015
72	ENSG00000231882	F10-As1	F10 antisense RNA 1	13	113782469	113783194	67	9.59E-05	0.036162015
73	ENSG00000229231	FEM1AP1	Fem-1 homolog a (C. elegans) pseudogene 1	21	15134659	15136653	67	9.59E-05	0.036162015
74	ENSG00000197766	CFD	Complement factor D (adipsin)	19	859453	863569	9	9.99E-05	0.03698971
75	ENSG00000100433	KCNK10	Potassium channel, subfamily K, member 10	14	88649113	88793251	13	0.000100736	0.03698971
76	ENSG00000129988	LBP	Lipopolysaccharide binding protein	20	36974759	37005665	11	0.000106947	0.038504
77	ENSG00000213424	KRT222	Keratin 222	17	38810917	38821433	10	0.00010762	0.038504
78	ENSG00000260896	RP11-314Q13.1		16	80862632	80926492	9	0.000113538	0.040277045
79	ENSG00000230229	RP11-90J7.4		10	80112354	80115857	14	0.000123313	0.04266026
80	ENSG00000110675	ELMOD1	ELMO/CED-12 domain containing 1	11	107461817	107537505	9	0.000124455	0.04270224
81	ENSG00000121270	ABCC11	ATP-binding cassette, subfamily C (CFTR/MRP)	16	48200821	48281479	9	0.000133276	0.044991335
82	ENSG00000111704	NANOG	NANOG homeobox	12	7940390	7948655	62	0.000140283	0.046604968

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 8.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 108 differentially expressed genes from only tumor tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000052850	ALX4	ALX homeobox 4	11	44281994	44331716	131	5.59E-08	0.000111501
2	ENSG00000204612	FOXB2	Forkhead box B2	9	79634571	79635869	662	4.11E-07	0.000593697
3	ENSG00000144355	DLX1	Distal-less homeobox 1	2	172949468	172954405	66	7.26E-07	0.000821114
4	ENSG00000007306	CEACAM7	Carcinoembryonic antigen-related cell adhesion molecule 7	19	42177235	42210895	63	1.42E-06	0.001451622
5	ENSG00000171759	PAH	Phenylalanine hydroxylase	12	103230663	103352188	36	6.65E-06	0.004799086
6	ENSG00000126733	DACH2	Dachshund homolog 2 (Drosophila)	X	85403462	86087607	36	7.24E-06	0.005048563
7	ENSG00000240045	RP11-451G4.2		3	155008018	155011564	48	1.02E-05	0.006800863
8	ENSG00000227560	RP11-139K1.2		10	114747235	114747624	46	1.12E-05	0.007322341
9	ENSG00000170373	CST1	Cystatin SN	20	23728190	23731905	29	1.67E-05	0.009967044
10	ENSG00000153294	GPR115	G protein-coupled receptor 115	6	47653600	47689757	40	2.42E-05	0.013316272
11	ENSG00000254349	RP11-758M4.1		8	75512010	75735548	29	3.75E-05	0.020150228
12	ENSG00000134443	GRP	Gastrin-releasing peptide	18	56887400	56898006	25	4.08E-05	0.020883677
13	ENSG00000171560	FGA	Fibrinogen alpha chain	4	155504278	155511918	225	4.28E-05	0.021347954
14	ENSG00000100665	SERPINA4	Serpin peptidase inhibitor, clade A (alpha-1 antitrypsin)	14	95027428	95036250	63	4.48E-05	0.021798893
15	ENSG00000230327	AC009234.1		2	50815828	50816553	39	4.60E-05	0.021798893

16	ENSG00000170426	SDR9C7	Short chain dehydrogenase/red uctase family 9C, member 7	12	57316938	57328189	25	5.60E-05	0.025738821
17	ENSG00000154975	CA10	Carbonic anhydrase X	17	49707674	50237377	36	6.09E-05	0.02656543
18	ENSG00000237567	RP3-359N14.2		6	106060542	106080071	24	7.39E-05	0.030073102
19	ENSG00000095627	TDRD1	Tudor domain containing 1	10	115939029	115992063	23	7.52E-05	0.030073102
20	ENSG00000224099	AC064834.1		2	196313256	196343649	31	8.66E-05	0.033874159
21	ENSG00000146039	SLC17A4	Solute carrier family 17 (sodium phosphate), member 4	6	25754927	25781419	27	8.89E-05	0.034471943
22	ENSG00000261045	RP11-673P17.4		16	27169775	27187908	22	0.000107141	0.038504
23	ENSG00000243236	RP1-214M20.2		6	52804524	52822319	18	0.000117679	0.041050234
24	ENSG00000156925	ZIC3	ZIC family member 3	X	136648301	136659850	53	0.000129321	0.044011046
25	ENSG00000128564	VGF	VGF nerve growth factor inducible	7	100805790	100808874	19	0.000145369	0.047914417
26	ENSG00000187416	LHFPL3	Lipoma HMGIC fusion partner-like 3	7	103969104	104549001	21	0.000150205	0.049121823

Chr, chromosome; BP, base pair; FDR, false discovery rate



**Table 9.** Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 186 differentially expressed genes from normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000136750	GAD2	Glutamate decarboxylase 2 (pancreatic islets and brain, 65kDa)	10	26505236	26593487	83	2.92E-14	1.33E-09
2	ENSG00000234931	MARK2P15	MAP/microtubule affinity-regulating kinase 2	10	85071384	85074231	61	1.53E-13	3.49E-09
3	ENSG00000244734	HBB	pseudogene 15 Hemoglobin, beta	11	5246694	5250625	33	2.31E-13	3.52E-09
4	ENSG00000205271	RP11-152F13.4		15	83128128	83145983	93	3.27E-13	3.73E-09
5	ENSG00000257846	RP11-597A11.3		10	27035522	27150016	34	3.34E-12	3.05E-08
6	ENSG00000235992	GRAMD4P2	GRAM domain containing 4 pseudogene 2	22	16227138	16228807	25	1.17E-11	8.93E-08
7	ENSG00000260125	RP11-31E22.1		15	86838880	86860404	44	5.47E-11	3.56E-07
8	ENSG00000168824	NSG1	Neuron-specific protein family member 1	4	4349867	4420785	21	8.87E-11	5.06E-07
9	ENSG00000244342	LINC00698	Long intergenic non-protein coding RNA 698	10	27399383	27444195	40	1.87E-10	9.47E-07
10	ENSG00000225960	RP11-360A18.1		9	122735372	122736600	53	3.31E-10	1.44E-06
11	ENSG00000259278	RP11-62C7.2		15	39311434	39317119	25	3.49E-10	1.44E-06
12	ENSG00000259379	RP11-925D8.5		15	58444805	58446606	88	5.08E-10	1.93E-06
13	ENSG00000254861	RP11-945A11.2		11	23782876	23826144	18	2.44E-09	7.41E-06
14	ENSG00000112280	COL9A1	Collagen, type IX, alpha 1	6	70924764	71012786	16	2.66E-09	7.58E-06
15	ENSG00000166006	KCNC2	Potassium voltage-gated channel, Shaw-related subfamily, member	12	75433857	75603648	15	3.42E-09	9.18E-06

16	ENSG00000258590	NBEAP1	Neurobeachin pseudogene 1	15	20862967	20893737	15	3.87E-09	9.80E-06
17	ENSG00000024526	DEPDC1	DEP domain containing 1	1	68939835	68962904	15	7.13E-09	1.71E-05
18	ENSG00000257751	RP11- 536C10.21		10	22045466	22292698	66	1.10E-08	2.39E-05
19	ENSG00000223609	HBD	Hemoglobin, delta	11	5253908	5256600	151	1.38E-08	2.86E-05
20	ENSG00000259472	RP13- 996F3.3		15	83141718	83182928	147	1.84E-08	3.64E-05
21	ENSG00000264063	MIR3687	MicroRNA 3687	21	9826203	9826263	14	2.04E-08	3.87E-05
22	ENSG00000002726	ABP1	Amiloride binding protein 1 (amine oxidase (copper containing))	7	150521715	150558592	13	2.81E-08	5.13E-05
23	ENSG00000213727	LA16c- 60G3.7		22	16404698	16405874	22	2.98E-08	5.23E-05
24	ENSG00000170893	TRH	Thyrotropin- releasing hormone	3	129693148	129696781	30	4.03E-08	6.81E-05
25	ENSG00000258027	RP11- 597A11.1		14	20078033	20146082	22	4.68E-08	7.63E-05
26	ENSG00000199916	RMRP	RNA component of mitochondrial RNA processing endonuclease	9	35657751	35658014	13	5.10E-08	8.02E-05
27	ENSG00000223542	RP1- 283K11.3		6	133756215	133760602	21	5.41E-08	8.23E-05
28	ENSG00000096006	CRISP3	Cysteine-rich secretory protein 3	6	49695097	49712150	12	6.41E-08	9.40E-05
29	ENSG00000257395	RP11- 597A11.2		14	20149579	20152898	24	6.60E-08	9.40E-05
30	ENSG00000258363	RP11- 146E13.6		14	19959517	19961162	12	7.14E-08	9.78E-05
31	ENSG00000121742	GJB6	Gap junction protein, beta 6, 30kDa	9	20796110	20806534	13	7.29E-08	9.78E-05

32	ENSG00000184115	RP13-1039J1.2		2	111143988	111192743	23	7.89E-08	0.00010277
33	ENSG00000237754	RP11-521C10.1		7	67706624	67707254	17	1.11E-07	0.000140766
34	ENSG00000225255	LA16c-83F12.6		22	16199666	16231333	11	1.45E-07	0.000169403
35	ENSG00000265971	RP11-269G24.6		17	61532354	61533178	15	1.49E-07	0.000169403
36	ENSG00000259761	RP11-138H10.2		15	87585285	87590392	119	1.65E-07	0.000183268
37	ENSG00000257731	RP11-536C10.11		14	19421521	19422698	14	1.82E-07	0.00019736
38	ENSG00000254851	RP11-109L13.1		11	117006244	117009298	16	1.90E-07	0.000201776
39	ENSG00000157884	CIB4	Calcium and integrin binding family member 4	2	26804070	26864236	12	2.15E-07	0.000222688
40	ENSG00000217889	RP11-66N11.5		X	152869952	152870803	25	2.57E-07	0.000260106
41	ENSG00000100121	GGTLC2	Gamma-glutamyltransferase light chain 2	22	22988780	22990368	12	2.90E-07	0.000287678
42	ENSG00000259671	RP11-925D8.6		15	58447159	58448260	46	4.25E-07	0.000412623
43	ENSG00000257357	RP11-244H18.3		14	20105463	20109540	23	5.50E-07	0.000522509
44	ENSG00000232783	AC073135.3		3	197836983	197838749	37	6.65E-07	0.000594735
45	ENSG00000234665	RP11-262H14.3		9	66513488	66553911	19	6.65E-07	0.000594735
46	ENSG00000225383	SFTA1P	Surfactant associated 1, pseudogene	10	10826400	10836943	23	7.16E-07	0.000627728
47	ENSG00000224371	RP11-235G24.1		9	161293920	161339681	18	8.21E-07	0.000701696
48	ENSG00000224758	RP13-137A17.5		10	134774844	134775741	17	8.31E-07	0.000701696
49	ENSG00000203697	CAPN8	Calpain 8	1	223711349	223853436	9	8.99E-07	0.000745586

50	ENSG00000257504	RP11-536C10.7		9	19406795	19410111	10	1.02E-06	0.000818554
51	ENSG00000188536	HBA2	Hemoglobin, alpha 2	16	222846	223709	9	1.02E-06	0.000818554
52	ENSG00000236045	RP3-467K16.7		9	15660662	15661960	10	1.59E-06	0.001178183
53	ENSG00000238245	MYO5BP2	Myosin VB pseudogene 2	9	66513032	66514308	29	1.63E-06	0.001178183
54	ENSG00000228897	CTD-2021A8.2		7	51454060	51454798	28	1.63E-06	0.001178183
55	ENSG00000257608	CTD-2311B13.6		9	19614216	19615884	9	1.66E-06	0.001178363
56	ENSG00000267242	AC069278.4		19	44978645	44979403	9	1.73E-06	0.001193033
57	ENSG00000183091	NEB	Nebulin	9	152341850	152591001	9	1.84E-06	0.001232515
58	ENSG00000222375	RN7SKP127	RNA, 7SK small nuclear pseudogene 127	16	29742372	29742725	9	1.84E-06	0.001232515
59	ENSG00000234567	RP1-283K11.2		6	133773995	133777743	12	1.87E-06	0.001232515
60	ENSG00000202198	RN7SK	RNA, 7SK small nuclear	9	52860418	52860748	9	2.18E-06	0.001422985
61	ENSG00000233845	AC093732.1		2	47262418	47267663	16	2.26E-06	0.001449668
62	ENSG00000230223	ATXN8OS	ATXN8 opposite strand (non-protein coding)	13	70681345	70705678	13	2.69E-06	0.001704723
63	ENSG00000206172	HBA1	Hemoglobin, alpha 1	16	226679	227521	9	2.93E-06	0.001829279
64	ENSG00000237674	GSTA7P	Glutathione S-transferase alpha 7, pseudogene	6	52604388	52609454	16	3.12E-06	0.001923142
65	ENSG00000163618	CADPS	Ca++-dependent secretion activator	3	62384022	62861054	8	3.27E-06	0.001963106
66	ENSG00000226958	RNA28S5	RNA, 28S ribosomal 5	X	108297361	108297792	8	3.41E-06	0.002012606
67	ENSG00000260581	CTB-113P19.4		5	151031836	151035010	9	3.44E-06	0.002012606

68	ENSG00000253998	IGKV2-29	Immunoglobulin kappa variable 2-29	2	89533655	89534393	40	3.89E-06	0.002192593
69	ENSG00000225649	AC064875.2		2	13106910	13147138	8	4.36E-06	0.002426373
70	ENSG00000150361	KLHL1	Kelch-like family member 1	13	70274726	70682591	9	4.84E-06	0.002632142
71	ENSG00000261760	RP11-1223D19.1		2	110988683	111043433	82	5.22E-06	0.002802477
72	ENSG00000233306	TRGV2	T cell receptor gamma variable 2	7	38402465	38403119	10	5.31E-06	0.00281554
73	ENSG00000233408	LA16c-23H5.4		22	16417269	16420386	12	5.47E-06	0.002868297
74	ENSG00000170356	OR2A20P	Olfactory receptor, family 2, subfamily A, member 20	7	143947138	143950050	11	6.71E-06	0.003474592
75	ENSG00000162344	FGF19	pseudogene Fibroblast growth factor 19	11	69513000	69519410	14	8.28E-06	0.004103311
76	ENSG00000238881	SCARNA2	Small Cajal body-specific RNA 2	1	109642815	109643234	8	9.34E-06	0.004580364
77	ENSG00000258730	ITPK1-AS1	ITPK1 antisense RNA 1	14	93533797	93538497	17	9.87E-06	0.004788171
78	ENSG00000211699	TRGV3	T cell receptor gamma variable 3	7	38398113	38398763	10	1.01E-05	0.004855999
79	ENSG00000260555	RP11-728K20.2		7	149697841	149702213	9	1.12E-05	0.005311565
80	ENSG00000251060	U66061.31		7	142413074	142426272	10	1.33E-05	0.006074933
81	ENSG00000225210	AL589743.1		14	19650018	19718563	7	1.40E-05	0.006338535
82	ENSG00000211688	TRGJP2	T cell receptor gamma joining P2	7	38295938	38295997	10	1.46E-05	0.006544322
83	ENSG00000244067	GSTA2	Glutathione S-transferase alpha 2	6	52614897	52628367	7	1.53E-05	0.00673148
84	ENSG00000249170	RP11-1J11.1		4	72165975	72166952	12	1.66E-05	0.007148469
85	ENSG00000232079	AL035610.1		21	29420733	29509930	13	1.77E-05	0.007533531

86	ENSG00000250984	CTD-2011G17.1		5	29796045	29796375	15	1.90E-05	0.008028562
87	ENSG00000258265	CTD-2311B13.2		14	19529958	19530898	69	2.07E-05	0.008578552
88	ENSG00000225258	AC009478.1		2	181436439	181557181	10	2.19E-05	0.008898036
89	ENSG00000180532	ZSCAN4	Zinc finger and SCAN domain containing 4	19	58180303	58190520	7	2.43E-05	0.00978666
90	ENSG00000138100	TRIM54	Tripartite motif containing 54	2	27505260	27530307	7	2.59E-05	0.010378663
91	ENSG00000231565	NEK2P2	NEK2 pseudogene 2	22	16364867	16366204	7	2.66E-05	0.010533754
92	ENSG00000227195	RP3-410C9.1		20	26167556	26232162	6	3.07E-05	0.012076346
93	ENSG00000164093	PITX2	Paired-like homeodomain 2	4	111538579	111563279	8	3.11E-05	0.012115254
94	ENSG00000169856	ONECUT1	One cut homeobox 1	15	53049186	53083273	65	3.38E-05	0.012962553
95	ENSG00000214976	VDAC2P1	Voltage-dependent anion channel 2 pseudogene 1	21	17466735	17467692	62	3.38E-05	0.012962553
96	ENSG00000117154	IGSF21	Immunoglobulin superfamily, member 21	1	18434240	18704977	6	3.77E-05	0.014250253
97	ENSG00000166748	AGBL1	ATP/GTP binding protein-like 1	15	86685227	87572283	8	3.78E-05	0.014250253
98	ENSG00000239736	CEACAMP3	Carcinoembryonic antigen-related cell adhesion molecule pseudogene 3	19	42106090	42112339	20	3.82E-05	0.014262985
99	ENSG00000204038	AL359195.1		10	82009466	82013395	27	3.99E-05	0.014672388
100	ENSG00000206177	HBM	Hemoglobin, mu	16	203891	216767	27	3.99E-05	0.014672388
101	ENSG00000267614	AC138472.6		19	45040251	45040599	11	4.45E-05	0.01622454
102	ENSG00000259425	RP11-566K19.5		15	23096869	23105332	7	4.99E-05	0.017634483
103	ENSG00000228477	RP3-342P20.2		1	40428352	40429076	9	5.34E-05	0.018747218

104	ENSG00000254127	IGLCOR22-1	Immunoglobulin lambda constant/OR22-1	22	32595906	32596221	14	5.40E-05	0.018800627
105	ENSG00000169427	KCNK9	Potassium channel, subfamily K, member 9	8	140613081	140715299	58	5.63E-05	0.019274052
106	ENSG00000261426	AC144833.1		15	27607456	27611544	58	5.63E-05	0.019274052
107	ENSG00000236714	AC005592.1		5	142125165	142140563	6	5.99E-05	0.020239635
108	ENSG00000166816	LDHD	Lactate dehydrogenase D	16	75145758	75150669	6	6.06E-05	0.020334552
109	ENSG00000178934	LGALS7B	Lectin, galactoside-binding, soluble, 7B	19	39279851	39282389	7	6.35E-05	0.021030946
110	ENSG00000148826	NKX6-2	NK6 homeobox 2	10	134598297	134599556	20	6.37E-05	0.021030946
111	ENSG00000244280	ECEL1P2	Endothelin converting enzyme-like 1, pseudogene 2	2	233250460	233252167	7	6.41E-05	0.021030946
112	ENSG00000259344	RP11-566K19.6		15	23095170	23115256	6	6.57E-05	0.021387892
113	ENSG00000253988	RP11-489O18.1		8	139075511	139085483	8	6.99E-05	0.022605697
114	ENSG00000255193	RP11-945A11.1		11	23752134	23818516	7	7.06E-05	0.022683372
115	ENSG00000256642	LINC00273	Long intergenic non-protein coding RNA 273	16	33961052	33962503	6	7.40E-05	0.023114368
116	ENSG00000173809	TDRD12	Tudor domain containing 12	19	33210659	33320483	6	7.63E-05	0.023665842
117	ENSG00000248408	RP11-452C8.1		4	80584915	80617991	6	7.72E-05	0.023667538
118	ENSG00000109158	GABRA4	Gamma-aminobutyric acid (GABA) A receptor, alpha 4	4	46920917	46996424	13	7.79E-05	0.023667538
119	ENSG00000261467	RP11-731K22.1		7	73400322	73403097	13	7.79E-05	0.023667538
120	ENSG00000234232	RP11-353N4.5		1	149691432	149698605	24	9.34E-05	0.028201554
121	ENSG00000152969	JAKMIP1	Janus kinase and microtubule interacting protein 1	4	6027926	6202318	6	9.95E-05	0.029754851

122	ENSG00000257898						6	9.98E-05	0.029754851
123	ENSG00000142619	PADI3	Peptidyl arginine deiminase, type III	1	17575593	17610728	6	0.000104146	0.030836563
124	ENSG00000264462	MIR3648	MicroRNA 3648	21	9825832	9826011	6	0.000105754	0.031110755
125	ENSG00000260284	TPSP2	Tryptase pseudogene 2	16	1336352	1338838	6	0.000106571	0.031150138
126	ENSG00000236138	RP11- 413E6.7		3	75718082	75719336	7	0.000111474	0.032375703
127	ENSG00000230666	CEACAM22P	Carcinoembryonic antigen-related cell adhesion molecule 2 pseudogene	19	45051045	45124119	6	0.000115579	0.03314582
128	ENSG00000257884	RP11- 587A11.4		14	20145996	20148263	6	0.000122949	0.034617353
129	ENSG00000235994	RP3- 470B24.5		6	168376604	168380456	11	0.000122988	0.034617353
130	ENSG00000205076	LGALS7	Lectin, galactoside- binding, soluble, 7	19	39261611	39264132	11	0.000122988	0.034617353
131	ENSG00000252139	SCARNA18	Small Cajal body- specific RNA 18	18	47340731	47340813	15	0.00012697	0.035518933
132	ENSG00000180383	DEFB124	Defensin, beta 124	20	30053309	30064560	7	0.000128563	0.035745202
133	ENSG00000170509	HSD17B13	Hydroxysteroid (17- beta) dehydrogenase 13	4	88224941	88244058	6	0.000132806	0.036480179
134	ENSG00000132204	LINC00470	Long intergenic non-protein coding RNA 470	18	1254384	1408345	7	0.000137231	0.037469935
135	ENSG00000237686	RP5- 1120P11.1		6	43963460	44042389	6	0.000143964	0.039074183
136	ENSG00000253326	RP11- 261C10.7		1	243218163	243219696	23	0.000145771	0.039330509
137	ENSG00000259600	RP11- 925D8.3		15	58443232	58444712	8	0.000152739	0.04072871
138	ENSG00000206195	AP000525.9		22	16147979	16193004	6	0.000154801	0.041038475
139	ENSG00000266998	RP11- 936I5.1		17	75369900	75373318	9	0.00016348	0.042841205



140	ENSG00000221673	U3	Small nucleolar RNA U3	1	220136028	220136206	49	0.000165955	0.042995614
141	ENSG00000240881	RP11- 713P14.1		11	23541868	23542748	49	0.000165955	0.042995614
142	ENSG00000170423	KRT78	Keratin 78	12	53231588	53242876	10	0.000168481	0.043159648
143	ENSG00000166268	MYRFL	Myelin regulatory factor-like	12	70219084	70352877	6	0.000170898	0.043533352
144	ENSG00000259787	CTB-85P21.2		5	143861871	143865249	10	0.000172198	0.043533352
145	ENSG00000263015	RP5- 1029F21.3		17	406411	414587	11	0.000172804	0.043533352
146	ENSG00000188000	OR7D2	Olfactory receptor, family 7, subfamily D, member 2	19	9296279	9299493	7	0.000182463	0.045464119
147	ENSG00000223764	RP11- 54O7.3		1	852250	855072	5	0.000195371	0.048154249

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 10.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 186 differentially expressed genes from normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000206073	SERPINB4	Serpin peptidase inhibitor, clade B (ovalbumin), member 4	18	61304493	61311532	69	7.13E-10	2.50E-06
2	ENSG00000164266	SPINK1	Serine peptidase inhibitor, Kazal type 1	5	147204131	147211349	63	1.01E-09	3.28E-06
3	ENSG00000226278	PSPHP1	Phosphoserine phosphatase pseudogene 1	7	55832490	55840981	100	8.43E-09	1.92E-05
4	ENSG00000170369	CST2	Cystatin SA	20	23804406	23807368	27	1.15E-07	0.000141837
5	ENSG00000057149	SERPINB3	Serpin peptidase inhibitor, clade B (ovalbumin), member 3	18	61322431	61329197	32	1.33E-07	0.000158996
6	ENSG00000264209	AC104448.1		3	48529745	48529838	266	6.30E-07	0.000586159
7	ENSG00000171564	FGB	Fibrinogen beta chain	9	155484108	155492236	67	1.11E-06	0.000869858
8	ENSG00000247627	MTND4P12	MT-ND4 pseudogene 12	5	134262350	134263726	19	1.13E-06	0.000869858
9	ENSG00000267056	AC005336.4		19	16021393	16022634	18	1.49E-06	0.001134641
10	ENSG00000156096	UGT2B4	UDP glucuronosyltransferase 2 family, polynucleotide B4	4	70345883	70391732	26	1.68E-06	0.001178363
11	ENSG00000175445	LPL	Lipoprotein lipase	9	19759228	19824769	16	3.25E-06	0.001963106
12	ENSG00000163735	CXCL5	Chemokine (C-X-C motif) ligand 5	4	74861359	74864496	16	3.54E-06	0.002038721
13	ENSG00000182816	KRTAP13-2	Keratin associated protein 13-2	21	31743709	31744557	40	3.58E-06	0.002038721
14	ENSG00000163209	SPRR3	Small proline-rich protein 3	1	152974223	152976332	29	4.85E-06	0.002632142
15	ENSG00000000005	TNMD	Tenomodulin	X	99839799	99854882	18	7.34E-06	0.003746265

16	ENSG00000184937	WT1	Wilms tumor 1	11	32409321	32457176	15	7.39E-06	0.003746265
17	ENSG00000251165	RP11-215A19.1		4	187207248	187422151	49	7.58E-06	0.003795706
18	ENSG00000134339	SAA2	Serum amyloid A2	11	18260770	18270190	13	1.14E-05	0.005357755
19	ENSG00000172238	ATOH1	Atonal homolog 1 (Drosophila)	4	94750042	94751221	22	1.15E-05	0.005357755
20	ENSG00000227063	RPL41P1	Ribosomal protein L41 pseudogene 1	20	21735866	21736171	17	1.20E-05	0.005515008
21	ENSG00000243063	IGKV3-7	Immunoglobulin kappa variable 3-7 (non-functional)	2	89277987	89278600	161	1.55E-05	0.00673148
22	ENSG00000143556	S100A7	S100 calcium binding protein A7	1	153430220	153433177	155	1.55E-05	0.00673148
23	ENSG00000211974	IGHV2-70	Immunoglobulin heavy variable 2-70	14	107178820	107179338	13	1.93E-05	0.008055596
24	ENSG00000198535	C2CD4A	C2 calcium-dependent domain containing 4A	15	62359176	62363116	12	2.17E-05	0.008898036
25	ENSG00000099290	FAM21A	Family with sequence similarity 21, member A	10	51827648	51893269	11	4.90E-05	0.017634483
26	ENSG00000231083	AC011747.6		2	8741022	8763072	36	4.93E-05	0.017634483
27	ENSG00000196427	NBPF4	Neuroblastoma breakpoint family, member 4	1	108765087	108786689	130	4.98E-05	0.017634483
28	ENSG00000104267	CA2	Carbonic anhydrase II	8	86376081	86393722	10	5.66E-05	0.019274052
29	ENSG00000198178	CLEC4C	C-type lectin domain family 4, member C	12	7882011	7904201	116	7.22E-05	0.023032885
30	ENSG00000233760	AC004947.2		7	26591441	26596819	11	7.32E-05	0.023114368
31	ENSG00000229403	RP4-718N17.2		7	51681947	51698566	15	7.36E-05	0.023114368
32	ENSG00000069206	ADAM7	ADAM metalloproteinase domain 7	8	24298443	24384483	13	0.00011541	0.03314582
33	ENSG00000104760	FGL1	Fibrinogen-like 1	8	17721889	17767874	12	0.00013199	0.036475647

34	ENSG00000095917	TPSD1	Tryptase delta 1	16	1306060	1308532	10	0.000149058	0.039980789
35	ENSG00000166396	SERPINB7	Serpin peptidase inhibitor, clade B (ovalbumin), member 7	18	61420169	61472604	10	0.00015935	0.042000137
36	ENSG00000119913	TECTB	Tectorin beta	10	114043493	114064793	11	0.000168324	0.043159648
37	ENSG00000121075	TBX4	T-box 4	17	59529765	59562471	9	0.000180519	0.045226933
38	ENSG00000164756	SLC30A8	Solute carrier family 30 (zinc transporter), member 8	8	117962512	118188953	17	0.000185505	0.045970975
39	ENSG00000244921	CTB-36O1.7		5	134258993	134259739	9	0.000201827	0.049478048

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 11.** Differentially expressed genes (FDR <0.05) down-regulated by soy isoflavone supplementation of the 166 differentially expressed genes from only normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000136750	GAD2	Glutamate decarboxylase 2 (pancreatic islets and brain, 65kDa)	10	26505236	26593487	83	2.92E-14	1.33E-09
2	ENSG00000244734	HBB	Hemoglobin, beta	11	5246694	5250625	33	2.31E-13	3.52E-09
3	ENSG00000205271	RP11-152F13.4		15	83128128	83145983	93	3.27E-13	3.73E-09
4	ENSG00000257846	RP11-597A11.3		14	20136988	20138162	34	3.34E-12	3.05E-08
5	ENSG00000235992	GRAMD4P2	GRAM domain containing 4 pseudogene 2	22	16227138	16228807	25	1.17E-11	8.93E-08
6	ENSG00000168824	NSG1	Neuron-specific protein family member 1	4	4349867	4420785	21	8.87E-11	5.06E-07
7	ENSG00000244342	LINC00698	Long intergenic non-protein coding RNA 698	3	62936105	63110738	40	1.87E-10	9.47E-07
8	ENSG00000225960	RP11-360A18.1		9	122735372	122736600	53	3.31E-10	1.44E-06
9	ENSG00000259278	RP11-62C7.2		15	39311434	39317119	25	3.49E-10	1.44E-06
10	ENSG00000259379	RP11-925D8.5		15	58444805	58446606	88	5.08E-10	1.93E-06
11	ENSG00000254861	RP11-945A11.2		11	23782876	23826144	18	2.44E-09	7.41E-06
12	ENSG00000112280	COL9A1	Collagen, type IX, alpha 1	6	70924764	71012786	16	2.66E-09	7.58E-06
13	ENSG00000166006	KCNC2	Potassium voltage-gated channel, Shaw-related	12	75433857	75603648	15	3.42E-09	9.18E-06
14	ENSG00000258590	NBEAP1	Neurobeachin pseudogene 1	15	20862967	20893737	15	3.87E-09	9.80E-06
15	ENSG00000024526	DEPDC1	DEP domain containing 1	1	68939835	68962904	15	7.13E-09	1.71E-05

16	ENSG00000257751	RP11-536C10.21		14	20136701	20137215	66	1.10E-08	2.39E-05
17	ENSG00000223609	HBD	Hemoglobin, delta	11	5253908	5256600	151	1.38E-08	2.86E-05
18	ENSG00000259472	RP13-996F3.3		15	83141718	83182928	147	1.84E-08	3.64E-05
19	ENSG00000264063	MIR3687	MicroRNA 3687	21	9826203	9826263	14	2.04E-08	3.87E-05
20	ENSG00000002726	ABP1	Amiloride binding protein 1 (amine oxidase)	7	150521715	150558592	13	2.81E-08	5.13E-05
21	ENSG00000213727	LA16c-60G3.7		22	16404698	16405874	22	2.98E-08	5.23E-05
22	ENSG00000170893	TRH	Thyrotropin-releasing hormone	3	129693148	129696781	30	4.03E-08	6.81E-05
23	ENSG00000199916	RMRP	RNA component of mitochondrial RNA processing	9	35657751	35658014	13	5.10E-08	8.02E-05
24	ENSG00000223542	RP1-283K11.3		6	133756215	133760602	21	5.41E-08	8.23E-05
25	ENSG00000257395	RP11-597A11.2		14	20149579	20152898	24	6.60E-08	9.40E-05
26	ENSG00000258363	RP11-146E13.6		14	19959517	19961162	12	7.14E-08	9.78E-05
27	ENSG00000121742	GJB6	Gap junction protein, beta 6, 30kDa	13	20796110	20806534	13	7.29E-08	9.78E-05
28	ENSG00000184115	RP13-1039J1.2		2	111143988	111192743	23	7.89E-08	0.00010277
29	ENSG00000237754	RP11-521C10.1		7	67706624	67707254	17	1.11E-07	0.00014077
30	ENSG00000225255	LA16c-83F12.6		22	16199666	16231333	11	1.45E-07	0.0001694
31	ENSG00000265971	RP11-269G24.6		17	61532354	61533178	15	1.49E-07	0.0001694
32	ENSG00000257731	RP11-536C10.11		14	19421521	19422698	14	1.82E-07	0.00019736

33	ENSG00000157884	CIB4	Calcium and integrin binding family member 4	2	26804070	26864236	12	2.15E-07	0.00022269
34	ENSG00000217889	RP11-66N11.5		X	152869952	152870803	25	2.57E-07	0.00026011
35	ENSG00000100121	GGTLC2	Gamma-glutamyltransferase light chain 2	22	22988780	22990368	12	2.90E-07	0.00028768
36	ENSG00000259671	RP11-925D8.6		15	58447159	58448260	46	4.25E-07	0.00041262
37	ENSG00000232783	AC073135.3		3	197836983	197838749	37	6.65E-07	0.00059474
38	ENSG00000225383	SFTA1P	Surfactant associated 1, pseudogene	10	10826400	10836943	23	7.16E-07	0.00062773
39	ENSG00000224371	RP11-235G24.1		6	161293920	161339681	18	8.21E-07	0.0007017
40	ENSG00000224758	RP13-137A17.5		10	134774844	134775741	17	8.31E-07	0.0007017
41	ENSG00000203697	CAPN8	Calpain 8	1	223711349	223853436	9	8.99E-07	0.00074559
42	ENSG00000257504	RP11-536C10.7		9	111899167	111929571	10	1.02E-06	0.00081855
43	ENSG00000188536	HBA2	Hemoglobin, alpha 2	16	222846	223709	9	1.02E-06	0.00081855
44	ENSG00000236045	RP3-467K16.7		9	113006091	113018920	10	1.59E-06	0.00117818
45	ENSG00000238245	MYO5BP2	Myosin VB pseudogene 2	9	131217466	131263239	29	1.63E-06	0.00117818
46	ENSG00000228897	CTD-2021A8.2		7	51454060	51454798	28	1.63E-06	0.00117818
47	ENSG00000257608	CTD-2311B13.6		9	114122972	114247025	9	1.66E-06	0.00117836
48	ENSG00000267242	AC069278.4		19	44978645	44979403	9	1.73E-06	0.00119303
49	ENSG00000183091	NEB	Nebulin	9	132565432	132573560	9	1.84E-06	0.00123251

50	ENSG00000222375	RN7SKP127	RNA, 7SK small nuclear pseudogene 177	16	29742372	29742725	9	1.84E-06	0.00123251
51	ENSG00000234567	RP1-283K11.2		6	133773995	133777743	12	1.87E-06	0.00123251
52	ENSG00000202198	RN7SK	RNA, 7SK small nuclear	9	132589569	132598142	9	2.18E-06	0.00142299
53	ENSG00000233845	AC093732.1		2	47262418	47267663	16	2.26E-06	0.00144967
54	ENSG00000230223	ATXN8OS	ATXN8 opposite strand (non-protein coding)	13	70681345	70705678	13	2.69E-06	0.00170472
55	ENSG00000206172	HBA1	Hemoglobin, alpha 1	16	226679	227521	9	2.93E-06	0.00182928
56	ENSG00000237674	GSTA7P	Glutathione S-transferase alpha 7, pseudogene	6	52604388	52609454	16	3.12E-06	0.00192314
57	ENSG00000163618	CADPS	Ca++-dependent secretion activator	3	62384022	62861054	8	3.27E-06	0.00196311
58	ENSG00000226958	RNA28S5	RNA, 28S ribosomal 5	X	108297361	108297792	8	3.41E-06	0.00201261
59	ENSG00000260581	CTB-113P19.4		5	151031836	151035010	9	3.44E-06	0.00201261
60	ENSG00000225649	AC064875.2		2	13106910	13147138	8	4.36E-06	0.00242637
61	ENSG00000150361	KLHL1	Kelch-like family member 1	13	70274726	70682591	9	4.84E-06	0.00263214
62	ENSG00000261760	RP11-1223D19.1		2	110988683	111043433	82	5.22E-06	0.00280248
63	ENSG00000233306	TRGV2	T cell receptor gamma variable 2	7	38402465	38403119	10	5.31E-06	0.00281554
64	ENSG00000233408	LA16c-23H5.4		22	16417269	16420386	12	5.47E-06	0.0028683
65	ENSG00000162344	FGF19	Fibroblast growth factor 19	11	69513000	69519410	14	8.28E-06	0.00410331
66	ENSG00000238881	SCARNA2	Small Cajal body-specific RNA 2	1	109642815	109643234	8	9.34E-06	0.00458036
67	ENSG00000258730	ITPK1-AS1	ITPK1 antisense RNA 1	14	93533797	93538497	17	9.87E-06	0.00478817



68	ENSG00000211699	TRGV3	T cell receptor gamma variable 3	7	38398113	38398763	10	1.01E-05	0.004856
69	ENSG00000260555	RP11- 728K20.2		7	149697841	149702213	9	1.12E-05	0.00531157
70	ENSG00000251060	U66061.31		7	142413074	142426272	10	1.33E-05	0.00607493
71	ENSG00000225210	AL589743.1		14	19650018	19718563	7	1.40E-05	0.00633854
72	ENSG00000211688	TRGJP2	T cell receptor gamma joining P2	7	38295938	38295997	10	1.46E-05	0.00654432
73	ENSG00000244067	GSTA2	Glutathione S- transferase alpha 2	6	52614897	52628367	7	1.53E-05	0.00673148
74	ENSG00000249170	RP11-IJ11.1		4	72165975	72166952	12	1.66E-05	0.00714847
75	ENSG00000232079	AL035610.1		21	29420733	29509930	13	1.77E-05	0.00753353
76	ENSG00000250984	CTD- 2011G17.1		5	29796045	29796375	15	1.90E-05	0.00802856
77	ENSG00000258265	CTD- 2311B13.2		14	19529958	19530898	69	2.07E-05	0.00857855
78	ENSG00000225258	AC009478.1		2	181436439	181557181	10	2.19E-05	0.00889804
79	ENSG00000180532	ZSCAN4	Zinc finger and SCAN domain containing 4	19	58180303	58190520	7	2.43E-05	0.00978666
80	ENSG00000138100	TRIM54	Tripartite motif containing 54	2	27505260	27530307	7	2.59E-05	0.01037866
81	ENSG00000231565	NEK2P2	NEK2 pseudogene 2	22	16364867	16366204	7	2.66E-05	0.01053375
82	ENSG00000227195	RP3-410C9.1		20	26167556	26232162	6	3.07E-05	0.01207635
83	ENSG00000164093	PITX2	Paired-like homeodomain 2	4	111538579	111563279	8	3.11E-05	0.01211525
84	ENSG00000169856	ONECUT1	One cut homeobox 1	15	53049186	53083273	65	3.38E-05	0.01296255

85	ENSG00000214976	VDAC2P1	Voltage-dependent anion channel 2 pseudogene 1	21	17466735	17467692	62	3.38E-05	0.01296255
86	ENSG00000117154	IGSF21	Immunoglobulin superfamily, member 21	1	18434240	18704977	6	3.77E-05	0.01425025
87	ENSG00000166748	AGBL1	ATP/GTP binding protein-like 1	15	86685227	87572283	8	3.78E-05	0.01425025
88	ENSG00000239736	CEACAMP3	Carcinoembryonic antigen-related cell adhesion	19	42106090	42112339	20	3.82E-05	0.01426299
89	ENSG00000204038	AL359195.1	Uncharacterized protein; cDNA FLJ46261 fis, clone	10	82009466	82013395	27	3.99E-05	0.01467239
90	ENSG00000206177	HBM	Hemoglobin, mu	16	203891	216767	27	3.99E-05	0.01467239
91	ENSG00000267614	AC138472.6		19	45040251	45040599	11	4.45E-05	0.01622454
92	ENSG00000259425	RP11-566K19.5		15	23096869	23105332	7	4.99E-05	0.01763448
93	ENSG00000228477	RP3-342P20.2		1	40428352	40429076	9	5.34E-05	0.01874722
94	ENSG00000254127	IGLCOR22-1	Immunoglobulin lambda constant/OR22-1	22	32595906	32596221	14	5.40E-05	0.01880063
95	ENSG00000169427	KCNK9	Potassium channel, subfamily K, member 9	8	140613081	140715299	58	5.63E-05	0.01927405
96	ENSG00000261426	AC144833.1		15	27607456	27611544	58	5.63E-05	0.01927405
97	ENSG00000236714	AC005592.1		5	142125165	142140563	6	5.99E-05	0.02023964
98	ENSG00000166816	LDHD	Lactate dehydrogenase D	16	75145758	75150669	6	6.06E-05	0.02033455
99	ENSG00000178934	LGALS7B	Lectin, galactoside-binding, soluble 7B	19	39279851	39282389	7	6.35E-05	0.02103095
100	ENSG00000148826	NKX6-2	NK6 homeobox 2	10	134598297	134599556	20	6.37E-05	0.02103095
101	ENSG00000244280	ECEL1P2	Endothelin converting enzyme-like 1, pseudogene 2	2	233250460	233252167	7	6.41E-05	0.02103095

102	ENSG00000259344	RP11-566K19.6		15	23095170	23115256	6	6.57E-05	0.02138789
103	ENSG00000253988	RP11-489Q18.1		8	139075511	139085483	8	6.99E-05	0.0226057
104	ENSG00000255193	RP11-945A11.1		11	23752134	23818516	7	7.06E-05	0.02268337
105	ENSG00000256642	LINC00273	Long intergenic non-protein coding RNA 273	16	33961052	33962503	6	7.40E-05	0.02311437
106	ENSG00000173809	TDRD12	Tudor domain containing 12	19	33210659	33320483	6	7.63E-05	0.02366584
107	ENSG00000248408	RP11-452C8.1		4	80584915	80617991	6	7.72E-05	0.02366754
108	ENSG00000109158	GABRA4	Gamma-aminobutyric acid (GABA) A receptor, alpha	4	46920917	46996424	13	7.79E-05	0.02366754
109	ENSG00000261467	RP11-731K22.1		7	73400322	73403097	13	7.79E-05	0.02366754
110	ENSG00000234232	RP11-353N4.5		1	149691432	149698605	24	9.34E-05	0.02820155
111	ENSG00000152969	JAKMIP1	Janus kinase and microtubule interacting	4	6027926	6202318	6	9.95E-05	0.02975485
112	ENSG00000257898						6	9.98E-05	0.02975485
113	ENSG00000142619	PADI3	Peptidyl arginine deiminase, type III	1	17575593	17610728	6	0.00010415	0.03083656
114	ENSG00000264462	MIR3648	MicroRNA 3648	21	9825832	9826011	6	0.00010575	0.03111075
115	ENSG00000260284	TPSP2	Tryptase pseudogene 2	16	1336352	1338838	6	0.00010657	0.03115014
116	ENSG00000236138	RP11-413E6.7		3	75718082	75719336	7	0.00011147	0.0323757
117	ENSG00000230666	CEACAM22P	Carcinoembryonic antigen-related cell adhesion	19	45051045	45124119	6	0.00011558	0.03314582
118	ENSG00000257884	RP11-597A11.4		14	20145996	20148263	6	0.00012295	0.03461735
119	ENSG00000235994	RP3-470B24.5		6	169376604	168380456	11	0.00012299	0.03461735

120	ENSG00000205076	LGALS7	Lectin, galactoside- binding, soluble	19	39261611	39264132	11	0.00012299	0.03461735
121	ENSG00000252139	SCARNA18	Small Cajal body-specific RNA 18	18	47340731	47340813	15	0.00012697	0.03551893
122	ENSG00000180383	DEFB124	Defensin, beta 124	20	30053309	30064560	7	0.00012856	0.0357452
123	ENSG00000170509	HSD17B13	Hydroxysteroid (17-beta) dehydrogenase 13	4	88224941	88244058	6	0.00013281	0.03648018
124	ENSG00000132204	LINC00470	Long intergenic non-protein coding RNA 470	18	1254384	1408345	7	0.00013723	0.03746994
125	ENSG00000237686	RP5- 1120P11.1		6	43963460	44042389	6	0.00014396	0.03907418
126	ENSG00000253326	RP11- 261C10.7		1	243218163	243219696	23	0.00014577	0.03933051
127	ENSG00000259600	RP11-925D8.3		15	58443232	58444712	8	0.00015274	0.04072871
128	ENSG00000206195	AP000525.9		22	16147979	16193004	6	0.0001548	0.04103847
129	ENSG00000266998	RP11-936I5.1		17	75369900	75373318	9	0.00016348	0.04284121
130	ENSG00000221673	U3	Small nucleolar RNA U3	1	220136028	220136206	49	0.00016596	0.04299561
131	ENSG00000240881	RP11- 713P14.1		11	23541868	23542748	49	0.00016596	0.04299561
132	ENSG00000170423	KRT78	Keratin 78	12	53231588	53242876	10	0.00016848	0.04315965
133	ENSG00000166268	MYRFL	Myelin regulatory factor-like	12	70219084	70352877	6	0.0001709	0.04353335
134	ENSG00000259787	CTB-85P21.2		5	143861871	143865249	10	0.0001722	0.04353335
135	ENSG00000263015	RP5- 1029F21.3		17	406411	414587	11	0.0001728	0.04353335
136	ENSG00000223764	RP11-54O7.3		1	852250	855072	5	0.00019537	0.04815425

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 12.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 166 differentially expressed genes from only normal tissue obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR
1	ENSG00000206073	SERPINB4	Serpin peptidase inhibitor, clade B (ovalbumin), member 4	18	61304493	61311532	69	7.13E-10	2.50E-06
2	ENSG00000057149	SERPINB3	Serpin peptidase inhibitor, clade B (ovalbumin), member 3	18	61322431	61329197	32	1.33E-07	0.000158996
3	ENSG00000264209	AC104448.1		3	48529745	48529838	266	6.30E-07	0.000586159
4	ENSG00000267056	AC005336.4		19	16021393	16022634	18	1.49E-06	0.001134641
5	ENSG00000175445	LPL	Lipoprotein lipase	9	19759228	19824769	16	3.25E-06	0.001963106
6	ENSG00000163735	CXCL5	Chemokine (C-X-C motif) ligand 5	4	74861359	74864496	16	3.54E-06	0.002038721
7	ENSG00000182816	KRTAP13-2	Keratin associated protein 13-2	21	31743709	31744557	40	3.58E-06	0.002038721
8	ENSG00000163209	SPRR3	Small proline-rich protein 3	1	152974223	152976332	29	4.85E-06	0.002632142
9	ENSG00000000005	TNMD	Tenomodulin	X	99839799	99854882	18	7.34E-06	0.003746265
10	ENSG00000184937	WT1	Wilms tumor 1	11	32409321	32457176	15	7.39E-06	0.003746265
11	ENSG00000251165	RP11-215A19.1		4	187207248	187422151	49	7.58E-06	0.003795706
12	ENSG00000134339	SAA2	Serum amyloid A2	11	18260770	18270190	13	1.14E-05	0.005357755
13	ENSG00000227063	RPL41P1	Ribosomal protein L41 pseudogene 1	20	21735866	21736171	17	1.20E-05	0.005515008
14	ENSG00000243063	IGKV3-7	Immunoglobulin kappa variable 3-7 (non-functional)	2	89277987	89278600	161	1.55E-05	0.00673148
15	ENSG00000143556	S100A7	S100 calcium binding protein A7	1	153430220	153433177	155	1.55E-05	0.00673148

16	ENSG00000211974	IGHV2-70	Immunoglobulin heavy variable 2-70	14	107178820	107179338	13	1.93E-05	0.008055596
17	ENSG00000198535	C2CD4A	C2 calcium-dependent domain containing 4A	15	62359176	62363116	12	2.17E-05	0.008898036
18	ENSG00000099290	FAM21A	Family with sequence similarity 21, member A	10	51827648	51893269	11	4.90E-05	0.017634483
19	ENSG00000231083	AC011747.6		2	8741022	8763072	36	4.93E-05	0.017634483
20	ENSG00000196427	NBPF4	Neuroblastoma breakpoint family, member 4	1	108765087	108786689	130	4.98E-05	0.017634483
21	ENSG00000104267	CA2	Carbonic anhydrase II	8	86376081	86393722	10	5.66E-05	0.019274052
22	ENSG00000198178	CLEC4C	C-type lectin domain family 4, member C	12	7882011	7904201	116	7.22E-05	0.023032885
23	ENSG00000229403	RP4-718N17.2		7	51681947	51698566	15	7.36E-05	0.023114368
24	ENSG00000069206	ADAM7	ADAM metallopeptidase domain 7	8	24298443	24384483	13	0.00011541	0.03314582
25	ENSG00000104760	FGL1	Fibrinogen-like 1	8	17721889	17767874	12	0.00013199	0.036475647
26	ENSG00000095917	TPSD1	Tryptase delta 1	16	1306060	1308532	10	0.000149058	0.039980789
27	ENSG00000166396	SERPINB7	Serpin peptidase inhibitor, clade B (ovalbumin), member 7	18	61420169	61472604	10	0.00015935	0.042000137
28	ENSG00000119913	TECTB	Tectorin beta	10	114043493	114064793	11	0.000168324	0.043159648
29	ENSG00000164756	SLC30A8	Solute carrier family 30 (zinc transporter), member 8	8	117962512	118188953	17	0.000185505	0.045970975
30	ENSG00000244921	CTB-36O1.7		5	134258993	134259739	9	0.000201827	0.049478048

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 13.** Differentially expressed genes (FDR < 0.05) present in both normal and tumor tissues obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

							Normal tissue			Tumor tissue		
	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR	Fold change	p-value	FDR
1	ENSG00000254851	RP11-109L13.1		11	117006244	117009298	-16	1.90E-07	0.000201776	-340	4.88E-14	5.11E-10
2	ENSG00000164266	SPINK1	Serine peptidase inhibitor, Kazal type 1	5	147204131	147211349	63	1.01E-09	3.28E-06	518	9.04E-11	5.41E-07
3	ENSG00000258027	RP11-597A11.1		14	20078033	20146082	-22	4.68E-08	7.63E-05	-31	2.20E-08	5.76E-05
4	ENSG00000121075	TBX4	T-box 4	17	59529765	59562471	9	0.000180519	0.045226933	-23	8.97E-08	0.000170712
5	ENSG00000253998	IGKV2-29	Immunoglobulin kappa variable 2-29	2	89533655	89534393	-40	3.89E-06	0.002192593	-174	1.35E-07	0.000234152
6	ENSG00000171564	FGB	Fibrinogen beta chain	4	155484108	155492238	67	1.11E-06	0.000869858	222	2.78E-07	0.000431338
7	ENSG00000257357	RP11-244H18.3		14	20105463	20109540	-23	5.50E-07	0.000522509	-24	5.87E-07	0.00072277
8	ENSG00000233760	AC004947.2		7	26591441	26596819	11	7.32E-05	0.023114368	68	5.90E-07	0.00072277
9	ENSG00000260125	RP11-31E22.1		15	86838880	86860404	-44	5.47E-11	3.56E-07	-40	2.03E-06	0.0018495
10	ENSG00000170369	CST2	Cystatin SA	20	23804406	23807368	27	1.15E-07	0.000141837	45	2.56E-06	0.002189989
11	ENSG00000096006	CRISP3	Cysteine-rich secretory protein 3	6	49695097	49712150	-12	6.41E-08	9.40E-05	44	3.69E-06	0.00302595
12	ENSG00000226278	PSPHP1	Phosphoserine phosphatase pseudogene 1	7	55832490	55840981	100	8.43E-09	1.92E-05	116	4.65E-06	0.003602916
13	ENSG00000156096	UGT2B4	UDP glucucosyltransferase 2 family, polypeptide B4	4	70345883	70391732	26	1.68E-06	0.001178363	28	4.06E-05	0.020883677
14	ENSG00000188000	OR7D2	Olfactory receptor, family 7, subfamily D, member 2	19	9296279	9299493	-7	0.000182463	0.045464119	-14	4.09E-05	0.020883677

15	ENSG00000172238	ATOH1	Atonal homolog 1 (Drosophila)	4	94750042	94751221	22	1.15E-05	0.005357755	216	4.63E-05	0.021798893
16	ENSG00000234665	RP11-262H14.3		9	66513488	66553911	-19	6.65E-07	0.000594735	-14	5.86E-05	0.026385604
17	ENSG00000234931	MARK2P15	MAP/microtubule affinity-regulating kinase 2 pseudogene 15	10	85071384	85074231	-61	1.53E-13	3.49E-09	-29	7.24E-05	0.030023263
18	ENSG00000170356	OR2A20P	Olfactory receptor, family 2, subfamily A, member 20 pseudogene	7	143947138	143950050	-11	6.71E-06	0.003474592	-12	0.000100736	0.03698971
19	ENSG00000247627	MTND4P12	MT-ND4 pseudogene 12	5	134262350	134263726	19	1.13E-06	0.000869858	18	0.000114525	0.040285875
20	ENSG00000259761	RP11-138H10.2		15	87585285	87590392	-119	1.65E-07	0.000183268	-64	0.000140283	0.046604968

Chr, chromosome; BP, base pair; FDR, false discovery rate



**Table 14.** Differentially expressed genes (FDR < 0.05) present in and differentially regulated by soy isoflavone supplementation in normal tissue compared to tumor tissues obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

							Normal tissue			Tumor tissue		
	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	p-value	FDR	Fold change	p-value	FDR
1	ENSG00000121075	TBX4	T-box 4	17	59529765	59562471	9	0.000180519	0.045226933	-23	8.97E-08	0.000170712
2	ENSG00000096006	CRISP3	Cysteine-rich secretory protein 3	6	49695097	49712150	-12	6.41E-08	9.40E-05	44	3.69E-06	0.00302595

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 15.** Differentially expressed genes (FDR < 0.05) down-regulated by soy isoflavone supplementation of the 20 differentially expressed genes present in both normal and tumor tissues obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	Normal tissue		Fold change	Tumor tissue	
								p-value	FDR		p-value	FDR
1	ENSG00000164266	SPINK1	Serine peptidase inhibitor, Kazal type 1	5	147204131	147211349	63	1.01E-09	3.28E-06	518	9.04E-11	5.41E-07
2	ENSG00000171564	FGB	Fibrinogen beta chain	4	155484108	155492238	67	1.11E-06	0.000869858	222	2.78E-07	0.000431338
3	ENSG00000233760	AC004947.2		7	26591441	26596819	11	7.32E-05	0.023114368	68	5.90E-07	0.00072277
4	ENSG00000170369	CST2	Cystatin SA	20	23804406	23807368	27	1.15E-07	0.000141837	45	2.56E-06	0.002189989
5	ENSG00000226278	PSPHP1	Phosphoserine phosphatase pseudogene 1	7	55832490	55840981	100	8.43E-09	1.92E-05	116	4.65E-06	0.003602916
6	ENSG00000156096	UGT2B4	UDP glucuronosyltransferase 2 family, polypeptide	4	70345883	70391732	26	1.68E-06	0.001178363	28	4.06E-05	0.020883677
7	ENSG00000172238	ATOH1	Atonal homolog 1 (Drosophila)	4	94750042	94751221	22	1.15E-05	0.005357755	216	4.63E-05	0.021798893
8	ENSG00000247627	MNTD4P12	MT-ND4 pseudogene 12	5	134262350	134263726	19	1.13E-06	0.000869858	18	0.000114525	0.040285875

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 16.** Differentially expressed genes (FDR < 0.05) up-regulated by soy isoflavone supplementation of the 20 differentially expressed genes present in both normal and tumor tissues obtained from 4 men who consumed soy isoflavones and 2 who consumed placebo (n = 6)

	Gene ID	Gene abbreviation	Gene name	Chr	BP Start	BP End	Fold change	Normal tissue		Tumor tissue		
								p-value	FDR	Fold change	p-value	FDR
1	ENSG00000254851	RP11-109L13.1		11	117006244	117009298	-16	1.90E-07	0.000201776	-340	4.88E-14	5.11E-10
2	ENSG00000258027	RP11-597A11.1		14	20078033	20146082	-22	4.68E-08	7.63E-05	-31	2.20E-08	5.76E-05
3	ENSG00000253998	IGKV2-29	Immunoglobulin kappa variable 2-29	2	89533655	89534393	-40	3.89E-06	0.002192593	-174	1.35E-07	0.000234152
4	ENSG00000257357	RP11-244H18.3		14	20105463	20109540	-23	5.50E-07	0.000522509	-24	5.87E-07	0.00072277
5	ENSG00000260125	RP11-31E22.1		15	86838880	86860404	-44	5.47E-11	3.56E-07	-40	2.03E-06	0.0018495
6	ENSG00000188000	OR7D2	Olfactory receptor, family 7, subfamily D, member 2	19	9296279	9299493	-7	0.000182463	0.045464119	-14	4.09E-05	0.020883677
7	ENSG00000234665	RP11-262H14.3		9	66513488	66553911	-19	6.65E-07	0.000594735	-14	5.86E-05	0.026385604
8	ENSG00000234931	MARK2P15	MAP/microtubule affinity-regulating kinase 2 pseudogene 15	10	85071384	85074231	-61	1.53E-13	3.49E-09	-29	7.24E-05	0.030023263
9	ENSG00000170356	OR2A20P	Olfactory receptor, family 2, subfamily A, member 20 pseudogene	7	143947138	143950050	-11	6.71E-06	0.003474592	-12	0.000100736	0.03698971
10	ENSG00000259761	RP11-138H10.2		15	87585285	87590392	-119	1.65E-07	0.000183268	-64	0.000140283	0.046604968

Chr, chromosome; BP, base pair; FDR, false discovery rate

**Table 17. Top 5 significantly enriched canonical pathways expressed in tumor tissue**

	<b>Canonical Pathways</b>	<b>-log(p-value)</b>	<b>Ratio</b>	<b>Molecules</b>
1	Extrinsic prothrombin activation pathway	2.59E00	1.25E-01	FGB, FGA
2	Human embryonic stem cell pluripotency	2.44E00	2.68E-02	NANOG, BMP5, ZIC3, WNT2
3	Intrinsic prothrombin activation pathway	2.11E00	6.25E-02	FGB, FGA
4	Acute phase response signaling	2.08E00	2.31E-02	FGB, LBP, FGA, RBP4
5	Complement system	2E00	6.06E-02	CFD, CR2

**Table 18. Top 5 significantly enriched canonical pathways expressed in normal tissue**

	<b>Canonical Pathways</b>	<b>-log(p-value)</b>	<b>Ratio</b>	<b>Molecules</b>
1	Role of IL-17A in psoriasis	2.96E00	1.54E-01	S100A7, CXCL5
2	Methylglyoxal degradation VI	2.42E00	1E00	LDHD
3	Glutamate dependent acid resistance	2.12E00	5E-01	GAD2
4	GABA receptor signaling	1.87E00	4.35E-02	GAD2, GABRA4
5	Protein citrullination	1.72E00	2E-01	PADI3

**Table 19. Top 5 significantly enriched canonical pathways expressed in both normal and tumor tissues**

	<b>Canonical Pathways</b>	<b>-log(p-value)</b>	<b>Ratio</b>	<b>Molecules</b>
1	Extrinsic prothrombin activation pathway	2.14E00	6.25E-02	FGB
2	Thyroid hormone metabolism II	1.93E00	2.85E-02	UGT2B4
3	Intrinsic prothrombin activation pathway	1.9E00	3.12E-02	FGB
4	Coagulation system	1.8E00	2.86E-02	FGB
5	Nicotine degradation pathway III	1.69E00	2.22E-02	UGT2B4

**Table 20. Specific genes expressed within the top 5 significantly enriched canonical pathways expressed in normal tissue, tumor tissue, and both tissues**

Genes	Canonical pathways	Normal tissue			Tumor tissue		
		Log ratio	p-value	FDR	Log ratio	p-value	FDR
UGT2B4	Thyroid hormone metabolism II Nicotine degradation III	+ 4.717	1.68E-06	1.18E-03	+ 4.784	4.06E-05	2.09E-02
FGB	Extrinsic prothrombin activation Intrinsic prothrombin activation Acute phase response signaling Coagulation system	+ 6.076	1.11E-06	8.70E-04	+ 7.795	2.78E-07	4.31E-04
S100A7	Role of IL-17A in psoriasis	+7.276	1.55E-05	6.73E-03			
CXCL5	Role of IL-17A in psoriasis	+3.972	3.54E-06	2.04E-03			
LDHD	Methylglyoxal degradation VI	-2.592	6.06E-05	2.03E-02			
GAD2	Glutamate dependent acid resistance GABA receptor signaling	-6.378	2.92E-14	1.33E-09			
GABRA4	GABA receptor signaling	-3.731	7.79E-05	2.37E-02			
PADI3	Protein citrullination	-2.546	1.04E-04	3.08E-02			
FGA	Extrinsic prothrombin activation Intrinsic prothrombin activation Acute phase response signaling				+7.814	4.28E-05	2.13E-02
ZIC3	Human embryonic stem cell pluripotency				+5.719	1.29E-04	4.40E-02
NANOG	Human embryonic stem cell pluripotency				-5.962	1.40E-04	4.66E-02
BMP5	Human embryonic stem cell pluripotency				-7.872	6.66E-16	2.79E-11
WNT2	Human embryonic stem cell pluripotency				-3.640	9.60E-06	6.48E-03
LBP	Acute phase response signaling				-3.466	1.07E-04	3.85E-02

RBP4	Acute phase response signaling	-4.010	1.46E-06	1.45E-03
CFD	Complement system	-3.151	9.99E-05	6.28E-04
CR2	Complement system	-4.850	2.54E-08	6.25E-05

FDR, false discovery rate



**Table 21. Clinical outcomes for study sample**

	Patient	1	2	3	4	5	6
		07	34	36	37	38	50
Pathology	Treatment	SOY	SOY	PLACEBO	SOY	PLACEBO	SOY
	Gleason score	7	9	7	7	7	7
	Stage	T2C N0 M0	T3A N0 M0	T2C N0 M0	T2A N1 M0	T2C N0 M0	T2C N0 M0
	AJCC	IIB	III	IIB	IIA	IIB	IIB
	Margins	NEG	NEG	NEG	NEG	NEG	POS
	Seminal vesicle invasion	NEG	NEG	NEG	NEG	NEG	NEG
	Extracapsular extension	NEG	POS	NEG	NEG	NEG	NEG
	PSA (ng/mL)	<0.04	821.3	0.00	0.04	0.00	0.00
	BCR	NO	NO	NO	NO	NO	NO
	Adjuvant treatment	NONE	ADT/CHEMO	NONE	NONE	NONE	NONE
Follow-up data	Salvage treatment	NONE	NONE	NONE	NONE	NONE	NONE
	Survival status	ALIVE	DEAD	DEAD	ALIVE	ALIVE	ALIVE
	Cause of death	ALIVE	PROSTATE CANCER	UNKNOWN	ALIVE	ALIVE	ALIVE

AJCC, American Joint Committee on Cancer; PSA, prostate specific antigen; BCR, biochemical recurrence

Figure 2. Top 5 significantly enriched canonical pathways expressed in tumor tissue

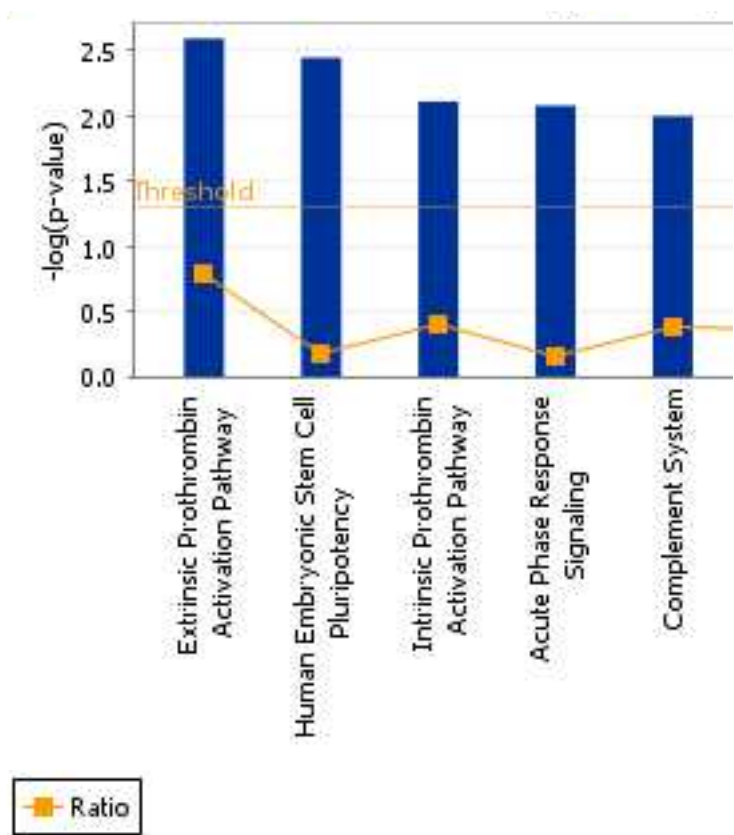


Figure 3. Percentage of genes expressed in the dataset within the top 5 significantly enriched canonical pathways expressed in tumor tissue

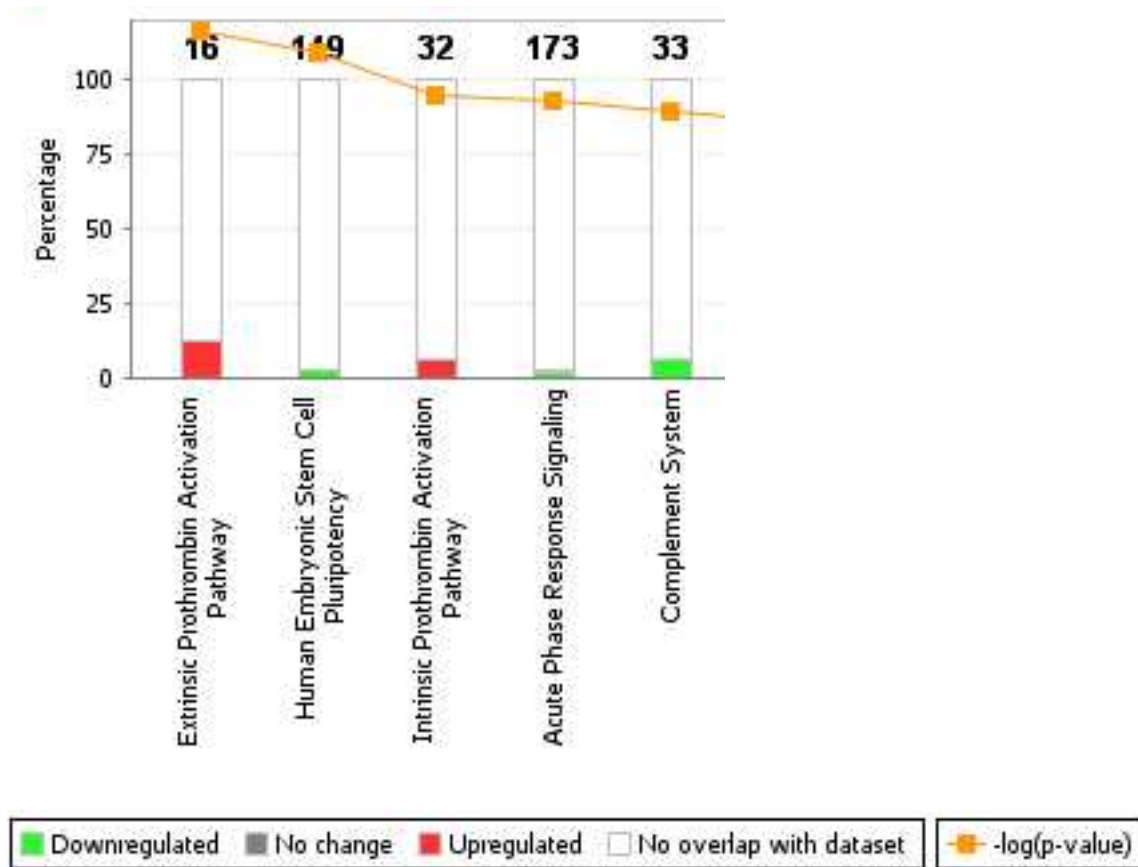


Figure 4. Top 5 significantly enriched canonical pathways expressed in normal tissue

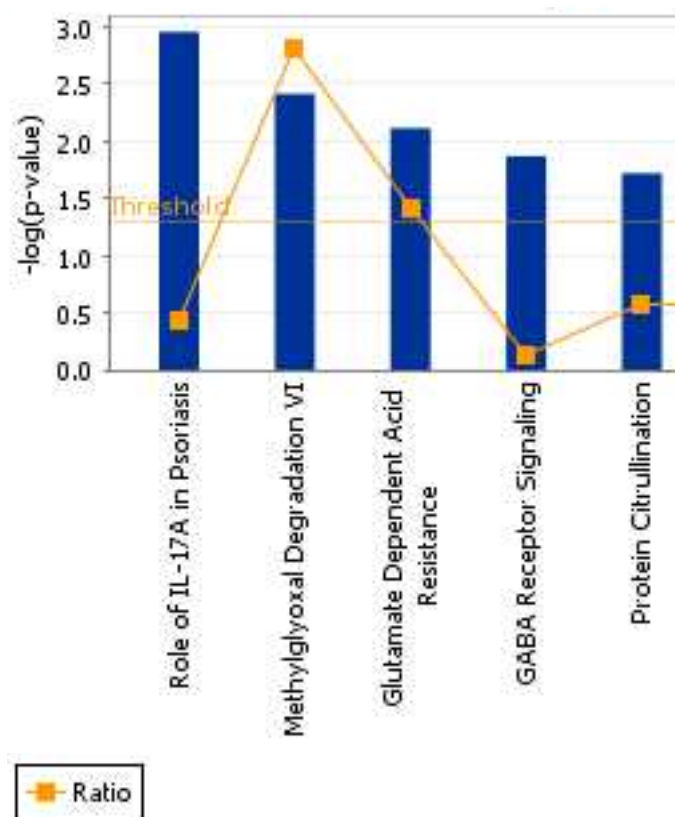
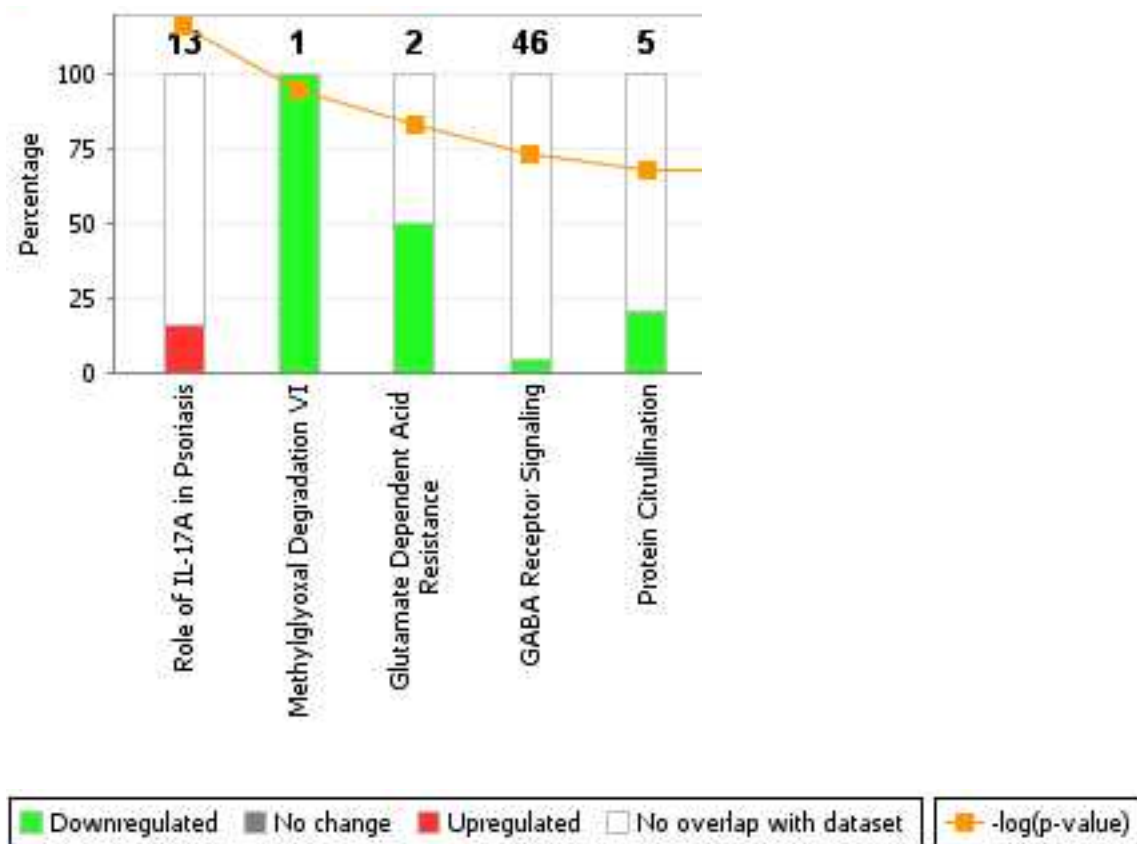


Figure 5. Percentage of genes expressed in the dataset with in the top 5 significantly enriched canonical pathways expressed in normal tissue



**Figure 6. Top 13 significantly enriched canonical pathways expressed in both normal and tumor tissues**

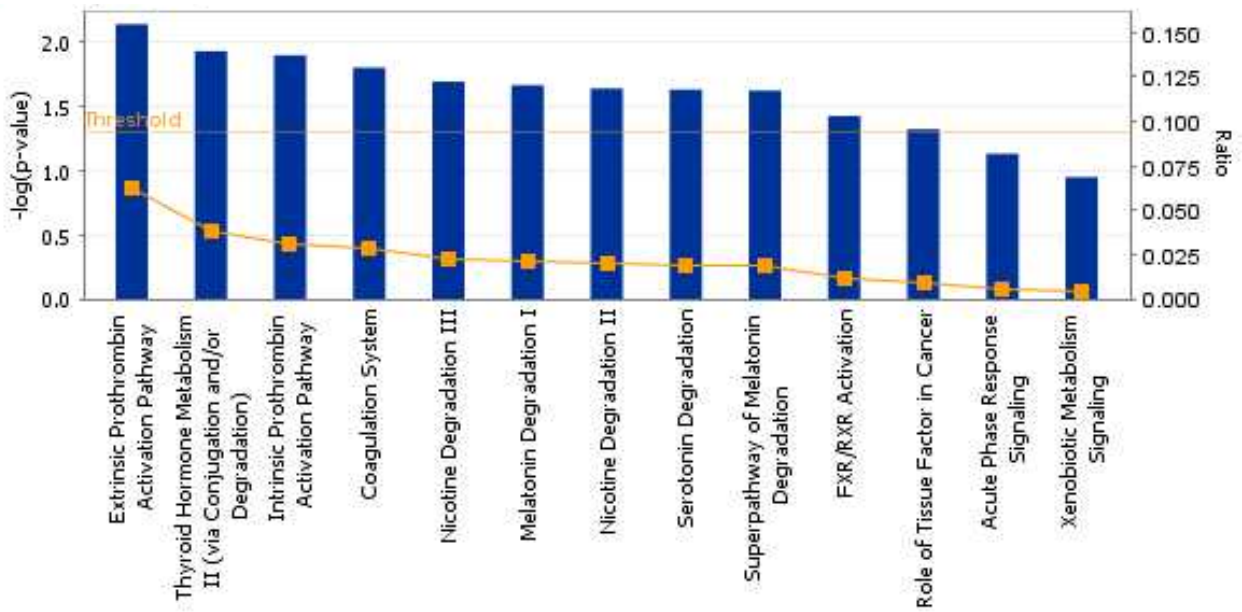
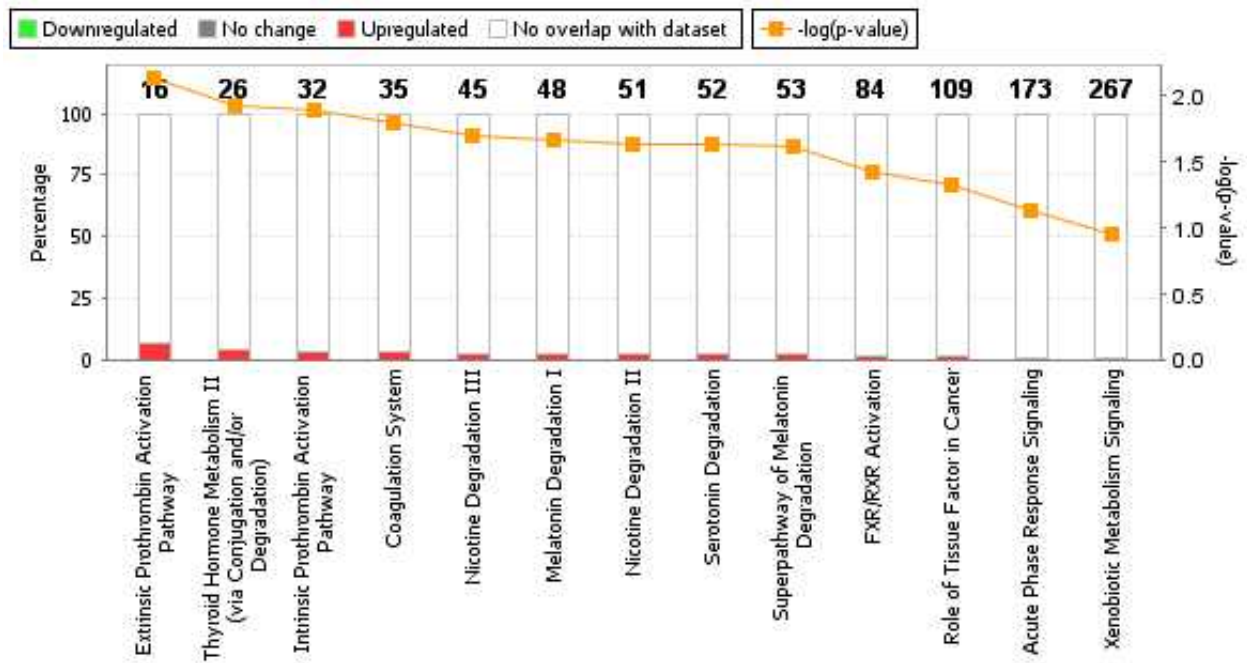


Figure 7. Percentage of genes expressed in the dataset within the top 13 significantly enriched canonical pathways expressed in normal and tumor tissues



## CHAPTER V: DISCUSSION

### Potentially harmful effects of soy isoflavones

#### *Normal and tumor tissue*

Canonical pathway analysis revealed that genes within the extrinsic and intrinsic prothrombin activation pathways – specifically the fibrinogen alpha chain (FGA) and the fibrinogen beta chain (FGB) genes – were significantly up-regulated by soy isoflavones in tumor tissue. FGA codes for the alpha component of fibrinogen (64); FGB codes for the beta component of fibrinogen (65). One study identified significantly up-regulated coagulation pathways in prostate cancer and benign prostate hyperplastic (BPH) tissue samples (66). The activation of the extrinsic prothrombin pathway was found in the plasma of 106 patients with solid tumors compared with 72 healthy volunteers, and modest intrinsic prothrombin activation was seen only in those cancer patients with advanced disease or in chemotherapy patients (67). Additionally, FGA and FGB were found to be significantly expressed in cancerous tissue of mice with lung cancer (68). Increased FGB expression has been associated with increased tumor stage in bladder cancer (69). These two genes were up-regulated in tumor tissue after exposure to soy isoflavones, suggesting a potentially harmful effect of soy isoflavones in prostate cancer. The FGB gene was also expressed and up-regulated in normal tissue. This pathway and these genes have not been correlated with the effect of soy isoflavones.



### ***Normal tissue***

Canonical pathway analysis also revealed that the role of IL-17A in psoriasis pathway – specifically the S100 calcium binding protein (S100A7) and chemokine, C-X-C motif (CXCL5) genes – was significantly up-regulated by soy isoflavones in normal prostate tissue. The exact function of the S100A7 molecule has not yet been determined (70); however, over-expression of S100A7 was associated with cell survival in prostate cancer cells derived from tumor tissue, as well as *in vitro* invasion in PC-3 cells (71). The CXCL5 gene codes for chemokines that may promote cancer cell proliferation, migration, and invasion (72). CXCL5 expression was found to correlate with prostate cancer progression (73). The up-regulation of these two genes in normal prostate tissue suggests a potentially harmful effect, though neither gene was present in actual tumor tissue. This pathway and these genes have not been correlated with the effect of soy isoflavones.

### **Potentially beneficial effects of soy isoflavones**

#### ***Tumor tissue***

The human embryonic stem cell pluripotency pathway was significantly modulated by soy isoflavones in tumor tissue. The ZIC family member 3 (ZIC3) gene was up-regulated by soy isoflavones in tumor tissue, while the Nanog homeobox (NANOG), the bone morphogenetic protein 5 (BMP5), and the wingless-type MMTV integration site family member 2 (WNT2) genes were down-regulated by soy isoflavones in tumor tissue. None of these genes were expressed in normal prostate tissue (**Table 19**). The

human embryonic stem cell pluripotency pathway has not been implicated in prostate cancer specifically; however, markers of this pathway have been found to correlate with aggressive tumors (74). Mathieu et al. (74) found a significant correlation between NANOG expression and increased Gleason score in primary prostate tumors. BMP5 and members of the WNT gene family have been implicated in tumor formation (75,76). The ZIC gene family has been found to be significantly expressed in brain tumors (77). Although soy isoflavones up-regulated the ZIC3 gene, suggesting a potentially harmful effect, they also down-regulated the NANOG, BMP5, and WNT2 genes in prostate tumor tissue, suggesting a potentially beneficial effect. This pathway and these genes have not been correlated with the effect of soy isoflavones.

The complement system pathway – specifically the complement factor D (CFD) and the complement component receptor 2 (CR2) genes – were significantly down-regulated by soy isoflavones in tumor tissue. These genes were not expressed in normal tissue (**Table 19**). CFD codes for a serine protease secreted by adipocytes and belongs to an alternative complement pathway known for its role in humoral suppression of infectious agents (78). One study explored the role of adipose tissue as a source of tumor progenitor cells, and found over-expression of CFD in periprostatic adipose tissue in prostate cancer patients (79). Soy isoflavone supplementation down-regulated this gene in tumor tissue, suggesting a beneficial effect of soy. CR2 codes for an Epstein-Barr virus receptor on B and T lymphocytes (80). The expression of CR2 and other genes related to Epstein-Barr virus infection has been found in tumor tissues of patients with brain cancer, breast cancer, colon cancer, cervical cancer, prostate cancer, and EBV-

negative Hodgkin's lymphoma (81). These two genes have been implicated in cancer development, appeared only in prostate tumor tissue, and were down-regulated by soy isoflavones. This suggests a potentially beneficial effect of soy. This pathway and these genes have not been correlated with the effect of soy isoflavones.

### ***Normal tissue***

The protein citrullination pathway – specifically peptidyl arginine deiminase, type 3 (PADI3) gene – was significantly down-regulated by soy isoflavones in normal prostate tissue. Protein citrullination involves converting arginine into citrullines (82). Although protein citrullination and the PADI4 gene have been implicated in tumor growth (83,84), the PADI3 gene has been related to skin and hair formation (82). The down-regulation of this gene in prostate cancer tissue samples suggests a potentially beneficial effect of soy isoflavones. This pathway and this gene have not been correlated with the effect of soy isoflavones.

The methylglyoxal degradation VI pathway was highly significant, specifically the lactate dehydrogenase D (LDHD) gene. One study revealed that this pathway was up-regulated in prostate cancer cells, and suggested that it favored cancer cell viability and proliferation (85). Genistein at 12 mg/kg diet was found to inhibit methylglyoxal-induced apoptosis in the mononuclear cells of female Wistar rats (86). The LDHD gene was down-regulated by soy isoflavones in normal prostate tissue, suggesting a potentially beneficial effect of soy isoflavones on prostate cancer progression.

## **Unknown role in prostate cancer**

### ***Tumor tissue***

The acute phase response signaling pathway – specifically the FGB, FGA, lipopolysaccharide binding protein (LBP), and retinol binding protein 4 (RBP4) genes – were significantly modulated by soy isoflavones in tumor tissue. The acute phase response signaling canonical pathway was found to be significantly up-regulated in prostate cancer and benign prostate hyperplastic (BPH) tissue samples (66). As mentioned previously, the FGB gene was significantly up-regulated by soy isoflavones in both normal and tumor tissues. The FGA gene was up-regulated only in tumor tissue, and was not present in normal tissue. The LBP and RBP4 genes were both down-regulated by soy isoflavones in prostate tumor tissue. Neither LBP or RBP4 have been implicated in oncogenesis, but they are both involved in the inflammatory response (87,88). The inflammatory response has been linked to cancer development and progression. Because LBP (89) and RBP4 (90) genes code for pro-inflammatory proteins, the down-regulation of LBP and RBP4 suggest a preventative, potentially beneficial effect of soy isoflavones. Half of the genes expressed in this pathway were related to cancer development and significantly up-regulated, while the other half were related to potential protective effects and were significantly down-regulated. This suggests conflicting effects of soy isoflavones, making it difficult to evaluate the benefit of soy supplementation in prostate cancer. This pathway and these genes have not been correlated with the effect of soy isoflavones.

### ***Normal tissue***

The glutamate dependent acid resistance pathway was also highly significant. The glutamate acid decarboxylase 2 (GAD2) gene was down-regulated by soy isoflavones in normal prostate tissue. The GAD2 gene, along with the down-regulated gamma-aminobutyric acid receptor 4 (GABRA4) gene, was also present in the GABA receptor signaling pathway. Hudgens et al. found that estradiol stimulated GAD2 expression in rats, the gene that codes for the enzyme primarily responsible for GABA synthesis (91). The structural similarity between soy isoflavones and estrogens may explain how they affected the expression of GAD2 in this study, though one would expect up-regulation instead of down-regulation. The role of these pathways and these genes in prostate cancer development and progression remains unknown. This pathway and these genes have not been correlated with the effect of soy isoflavones.

### ***Overlapping pathways***

The UDP-glucuronosyltransferase 2 family, polypeptide B4 (UGT2B4) gene was up-regulated by soy isoflavones in both normal and tumor tissues. This gene is a part of the thyroid hormone metabolism III and nicotine degradation pathways, which have not yet been correlated with prostate cancer. Enzymes from UGT2B family affect metabolism and excretion of steroids (92). Though this gene has not been linked with prostate cancer specifically, Lampe et al. (92) found that the prevalence of UGT2B4 was significantly higher in people of Asian descent compared with Caucasians, and that all Asians were homozygous for UGT2B4 compared with Caucasians, potentially explaining

the soy isoflavone intake, Asian population, and reduced prostate cancer incidence link. This pathway and this gene have not been correlated with the effect of soy isoflavones.

### **Strengths and limitations**

The majority of this study's limitations originate from the retrospective study design. The quantity and quality of the biospecimen inventory was affected due to lack of control over data storage and collection. Because of this, the prostatectomy samples available for RNA sequencing were limited to 6, rather than the expected 14 prostatectomy samples. As the samples were banked for several years prior to their present use, the storage conditions and therefore the quality of the samples may have been affected. Additionally, the amount of blood lost during surgery and the distribution of epithelial and stromal tissues in the prostatectomy sample have been found to affect the quality of the RNA (18). The parent study did not track these particular variables, but quality control was conducted before sequencing, and all RNA samples had RNA integrity numbers (RIN) over 2.80, indicating good quality.

The choice of isoflavone supplement provided proportionally more daidzein than isoflavone supplements derived from whole soybeans. Whole soy products provide an average isoflavone distribution of 50% genistein, 40% daidzein, and 10% glycitein, while soy germ products provide 15% genistein, 40% daidzein, and 40% glycitein. The majority of reviewed studies focused on products derived from whole soy or on genistein specifically, making it difficult to compare the findings. However, the supplement does

represent a human physiological isoflavone dose so significant effects should be reproducible in humans.

Although the study's sample size was small, the reviewed RNA sequencing human interventions ranged from 3 to 16 participants. A strength of the present study was its use of normal/tumor tissue pairs, as few studies studied the transcriptomes of human tissue and used cell lines or blood cells instead. The relatively short 2 to 4 week dietary intervention period was originally thought to be a limitation, though the majority of interventions employed in the reviewed studies induced a significant change in the transcriptome of cells in as little as 2 weeks. The original protocol did not require an extensive diet history, making it difficult to control for confounding dietary factors.

Human transcriptomic studies are few, especially when focusing specifically on soy isoflavones and prostate cancer. No studies reviewed had investigated the transcriptome of prostate cancer cells using RNA sequencing. Using NGS RNA seq technology provides for much more detailed data.

## **Conclusion**

This study provided an opportunity to observe the effects of short-term soy supplementation on the transcriptome in a human model and found that many of the top pathways expressed in normal and cancerous prostate tissue were related to cancer processes and regulated by soy isoflavones. The data provided useful common pathway maps for future understanding of the role of soy isoflavones in prostate cancer prevention, development, and progression.

Soy isoflavones differentially expressed 128 genes in cancerous prostate tissue and 166 genes in normal prostate tissue. Twenty genes were expressed in both cancerous and normal prostate tissue, two of which were differentially regulated by soy isoflavones. Soy isoflavones affected tumor and normal cells differently. Some pathways suggested a protective effect, such as the down-regulation of genes involved in the human embryonic stem cell pluripotency pathway, the complement system pathway, the protein citrullination pathway, and the methylglyoxal degradation VI pathway. Other pathways suggest harm, including the up-regulation of genes involved in the extrinsic and intrinsic prothrombin activation pathways as well as the IL-17A pathway. The following pathways are of unknown relevance: the acute phase response signaling pathway, the UDP-glucuronosyltransferase pathway, and the glutamate dependent acid resistance pathway.

Previous soy isoflavone supplementation interventions in prostate cancer patients have not affected PSA values, hormone profiles, or the incidence of biochemical recurrence, but microarray and RNA sequencing data suggest genetic and molecular changes. The clinical relevance of these findings are still uncertain. Further studies are needed to elucidate the findings and contribute clinically applicable results. Additionally, future studies that compare this study's data with online data repositories would be warranted.



## CHAPTER VI: REFERENCES

1. Siegel R, Naishadham D, Jemal A. Cancer Statistics, 2013. *CA Cancer J Clin*. 2013;63(1):11–30.
2. Jemal A, Bray F, Ferlay J. Global Cancer Statistics. *CA Cancer J Clin*. 2011;61(2):69–90.
3. Jemal A, Center MM, DeSantis C, Ward EM. Global patterns of cancer incidence and mortality rates and trends. *Cancer epidemiology, biomarkers & prevention : a publication of the American Association for Cancer Research, cosponsored by the American Society of Preventive Oncology* [Internet]. 2010 Aug [cited 2013 May 27];19(8):1893–907. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/20647400>
4. Messina M, Kucuk O, Lample JW. An overview of the health effects of isoflavones with an emphasis on prostate cancer risk and prostate-specific antigen levels. *Journal of AOAC International*. 2006;89(4):1121–34.
5. Yuan Y, Ferguson LR. Nutrigenetics and prostate cancer: 2011 and beyond. *Journal of nutrigenetics and nutrigenomics* [Internet]. 2011 Jan [cited 2013 May 22];4(3):121–36. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/21646812>
6. Elliott RM. Transcriptomics and micronutrient research. *The British journal of nutrition* [Internet]. 2008 Jun [cited 2013 May 5];99 Suppl 3:S59–65. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/18598590>
7. Kim J, Yu J. Interrogating genomic and epigenomic data to understand prostate cancer. *Biochim Biophys Acta*. 2012;1825(2):186–96.
8. Howlander N, Noone A, Krapcho M, Garshell J, Neyman N, Altekruse S, et al. SEER Prostate Cancer Statistics. *SEER Cancer Statistics Review, 1975-2010*. 2012.

9. Uchio EM, Aslan M, Wells CK, Calderone J, Concato J. Impact of biochemical recurrence in prostate cancer among US veterans. *Archives of internal medicine* [Internet]. 2010 Aug 9;170(15):1390–5. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/20696967>
10. Agarwal PK, Sadetsky N, Konety BR, Resnick MI, Carroll PR. Treatment failure after primary and salvage therapy for prostate cancer: likelihood, patterns of care, and outcomes. *Cancer* [Internet]. 2008 Jan 15 [cited 2013 May 24];112:307–14. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/18050294>
11. American Cancer Society. Prostate cancer [Internet]. 2012. p. 1–85. Available from: <http://www.cancer.org/acs/groups/cid/documents/webcontent/003134-pdf.pdf>
12. Martens-Uzunova ES, Jalava SE, Dits NF, Van Leenders GJLH, Møller S, Trapman J, et al. Diagnostic and prognostic signatures from the small non-coding RNA transcriptome in prostate cancer. *Oncogene* [Internet]. 2012 Feb 23 [cited 2013 Feb 28];31(8):978–91. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/21765474>
13. Fenech M, El-Sohemy A, Cahill L, Ferguson LR, French T-AC, Tai ES, et al. Nutrigenetics and nutrigenomics: viewpoints on the current status and applications in nutrition research and practice. *Journal of nutrigenetics and nutrigenomics* [Internet]. 2011 Jan [cited 2013 May 22];4(2):69–89. Available from: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=3121546&tool=pmcentrez&rendertype=abstract>
14. Nature Education. Ribosomes, transcription, and translation. *Scitable: Nature*. 2013.
15. Kok TMCM De, Breda SGJ Van, Briedé JJ. Genomics-based identification of molecular mechanisms behind the cancer preventive action of phytochemicals: potential and

- challenges. *Current pharmaceutical biotechnology* [Internet]. 2012 Jan;13(1):255–64. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/21466423>
16. Perkel JM. Transcriptome analysis: Microarrays, qPCR, and RNA-Seq. *Biocompare: The Buyer's Guide for Life Scientists*. 2013.
  17. Steiner C, Arnould S, Scalbert A, Manach C. Isoflavones and the prevention of breast and prostate cancer: new perspectives opened by nutrigenomics. [Internet]. *The British journal of nutrition*. 2008 [cited 2013 Mar 1]. p. E578–108. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/18503737>
  18. Bertilsson H, Angelsen a, Viset T, Anderssen E, Halgunset J. RNA quality in fresh frozen prostate tissue from patients operated with radical prostatectomy. *Scandinavian journal of clinical and laboratory investigation* [Internet]. 2010 Feb [cited 2013 May 5];70(1):45–53. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/20073672>
  19. American Cancer Society. Soybean [Internet]. 2013. Available from: <http://www.cancer.org/treatment/treatmentsandsideeffects/complementaryandalternativemedicine/dietandnutrition/soybean>
  20. Barrett JR. The Science of Soy: What Do We Really Know? *Environ Health Perspect*. 2006;114(6):A352–A358.
  21. Soyfoods Association of America. Soy information: Sales and trends. 2011.
  22. Messina M, Nagata C, Wu AH. Estimated Asian adult soy protein and isoflavone intakes. *Nutrition and cancer* [Internet]. 2006 Jan;55(1):1–12. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/16965235>

23. U.S. Department of Agriculture. USDA Database for the isoflavone content of selected foods, release 2.0 [Internet]. 2008. Available from:  
<http://www.ars.usda.gov/nutrientdata/isoflav>
24. Setchell KDR, Cassidy A. Dietary Isoflavones : Biological Effects and Relevance to Human Health. *J Nutr.* 1999;129:758S–767S.
25. Nagata C, Inaba S, Kawakami N, Kakizoe T, Shimizu H. Inverse association of soy product intake with serum androgen and estrogen concentrations in Japanese men. *Nutrition and cancer* [Internet]. 2000 Jan;36(1):14–8. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/10798211>
26. Nagata C, Shimizu H, Takami R, Hayashi M, Takeda N, Yasuda K. Association of blood pressure with intake of soy products and other food groups in Japanese men and women. *Preventive Medicine* [Internet]. 2003 Jun [cited 2013 May 24];36(6):692–7. Available from: <http://linkinghub.elsevier.com/retrieve/pii/S0091743503000525>
27. Wakai K, Egami I, Kato K, Kawamura T, Tamakoshi A, Lin Y, et al. Dietary intake and sources of isoflavones among Japanese. *Nutrition and cancer.* 1999;33(2):139–45.
28. Ahmad IU, Forman JD, Sarkar FH, Hillman GG, Heath E, Vaishampayan U, et al. Soy isoflavones in conjunction with radiation therapy in patients with prostate cancer. *Nutrition and cancer* [Internet]. 2010 Jan [cited 2013 Jul 3];62(7):996–1000. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/20924975>
29. Gardner CD, Oelrich B, Liu J, Feldman D, Franke AA, Brooks JD. Prostatic soy isoflavone concentrations exceed serum levels after dietary supplementation. *Prostate.* 2009;69(7):719–26.

30. Swami S, Krishnan A V, Moreno J, Bhattacharyya RS, Gardner C, Brooks JD, et al.  
Inhibition of prostaglandin synthesis and actions by genistein in human prostate cancer cells and by soy isoflavones in prostate cancer patients. *International journal of cancer*. *Journal international du cancer* [Internet]. 2009 May 1 [cited 2013 May 11];124(9):2050–9. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/19127598>
31. Kolehmainen M, Mykkänen O, Kirjavainen P V, Leppänen T, Moilanen E, Adriaens M, et al. Bilberries reduce low-grade inflammation in individuals with features of metabolic syndrome. *Molecular nutrition & food research* [Internet]. 2012 Oct [cited 2013 Apr 8];56(10):1501–10. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/22961907>
32. Ryu M-S, Langkamp-Henken B, Chang S-M, Shankar MN, Cousins RJ. Genomic analysis, cytokine expression, and microRNA profiling reveal biomarkers of human dietary zinc depletion and homeostasis. *Proceedings of the National Academy of Sciences of the United States of America* [Internet]. 2011 Dec 27 [cited 2013 Mar 14];108(52):20970–5. Available from:  
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=3248538&tool=pmcentrez&rendertype=abstract>
33. Bhamre S, Sahoo D, Tibshirani R, Dill DL, Brooks JD. Temporal changes in gene expression induced by sulforaphane in human prostate cancer cells. *Prostate*. 2009;69(2):181–90.
34. Takahashi Y, Konishi T. Tofu (soybean curd) lowers serum lipid levels and modulates hepatic gene expression involved in lipogenesis primarily through its protein, not isoflavone, component in rats. *Journal of agricultural and food chemistry* [Internet]. 2011

- Aug 24;59(16):8976–84. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/21721588>
35. Siler U, Barella L, Spitzer V, Schnorr J, Lein M, Goralczyk R, et al. Lycopene and vitamin E interfere with autocrine/paracrine loops in the Dunning prostate cancer model. *FASEB journal : official publication of the Federation of American Societies for Experimental Biology* [Internet]. 2004 Jun [cited 2013 May 5];18(9):1019–21. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/15084515>
36. Iqbal MJ, Yaegashi S, Ahsan R, Lightfoot D a, Banz WJ. Differentially abundant mRNAs in rat liver in response to diets containing soy protein isolate. *Physiological genomics* [Internet]. 2002 Dec 3 [cited 2013 Mar 4];11(3):219–26. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/12388795>
37. Takahashi Y, Ide T. Effects of soy protein and isoflavone on hepatic fatty acid synthesis and oxidation and mRNA expression of uncoupling proteins and peroxisome proliferator-activated receptor gamma in adipose tissues of rats. *The Journal of nutritional biochemistry* [Internet]. 2008 Oct [cited 2013 May 7];19(10):682–93. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/18328687>
38. Boomgaarden I, Egert S, Rimbach G, Wolfram S, Müller MJ, Döring F. Quercetin supplementation and its effect on human monocyte gene expression profiles in vivo. *The British journal of nutrition* [Internet]. 2010 Aug [cited 2013 Mar 26];104(3):336–45. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/20416132>
39. Pagmantidis V, Méplan C, Van Schothorst EM, Keijer J, Hesketh JE. Supplementation of healthy volunteers with nutritionally relevant amounts of selenium increases the

- expression of lymphocyte protein biosynthesis genes. The American journal of clinical nutrition [Internet]. 2008 Jan;87(1):181–9. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/18175754>
40. Niculescu MD, Pop E a, Fischer LM, Zeisel SH. Dietary isoflavones differentially induce gene expression changes in lymphocytes from postmenopausal women who form equol as compared with those who do not. The Journal of nutritional biochemistry [Internet]. 2007 Jun [cited 2013 Mar 1];18(6):380–90. Available from:  
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2441946&tool=pmcentrez&rendertype=abstract>
41. Xu L, Ding Y, Catalona WJ, Yang XJ, Anderson WF, Jovanovic B, et al. MEK4 function, genistein treatment, and invasion of human prostate cancer cells. Journal of the National Cancer Institute [Internet]. 2009 Aug 19 [cited 2013 May 11];101(16):1141–55. Available from:  
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2728746&tool=pmcentrez&rendertype=abstract>
42. Traka M, Gasper A V, Smith JA, Hawkey CJ, Bao Y, Mithen RF. Nutrient-Gene Interactions Transcriptome Analysis of Human Colon Caco-2 Cells Exposed. Am J Clin Nutr. 2005;135(8):1865–72.
43. Thangapazham RL, Shaheduzzaman S, Kim K-H, Passi N, Tadese A, Vahey M, et al. Androgen responsive and refractory prostate cancer cells exhibit distinct curcumin regulated transcriptome. Cancer biology & therapy [Internet]. 2008 Sep;7(9):1427–35. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/18719366>

44. Pitchakarn P, Suzuki S, Ogawa K, Pompimon W, Takahashi S, Asamoto M, et al. Kuguacin J, a triterpenoid from *Momordica charantia* leaf, modulates the progression of androgen-independent human prostate cancer cell line, PC3. *Food and chemical toxicology* : an international journal published for the British Industrial Biological Research Association [Internet]. Elsevier Ltd; 2012 Mar [cited 2013 May 5];50(3-4):840–7. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/22266361>
45. Kelly L a, O’Leary JJ, Seidlova-Wuttke D, Wuttke W, Norris L a. Genistein alters coagulation gene expression in ovariectomised rats treated with phytoestrogens. *Thrombosis and haemostasis* [Internet]. 2010 Dec [cited 2013 May 7];104(6):1250–7. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/20838740>
46. Li Y, Sarkar FH. Gene expression profiles of genistein-treated PC3 prostate cancer cells. *The Journal of Nutrition* [Internet]. 2002 Dec;132(12):3623–31. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/12468598>
47. Suzuki K, Koike H, Matsui H, Ono Y, Hasumi M, Nakazato H, et al. Genistein, a soy isoflavone, induces glutathione peroxidase in the human prostate cancer cell lines LNCaP and PC-3. *International journal of cancer. Journal international du cancer* [Internet]. 2002 Jun 20 [cited 2013 May 7];99(6):846–52. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/12115487>
48. Skogseth H, Follestad T, Larsson E, Halgunset J. Transcription levels of invasion-related genes in prostate cancer cells are modified by inhibitors of tyrosine kinase. *APMIS : acta pathologica, microbiologica, et immunologica Scandinavica* [Internet]. 2006 May;114(5):364–71. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/16725013>



49. Majid S, Dar A a, Shahryari V, Hirata H, Ahmad A, Saini S, et al. Genistein reverses hypermethylation and induces active histone modifications in tumor suppressor gene B-Cell translocation gene 3 in prostate cancer. *Cancer* [Internet]. 2010 Jan 1 [cited 2013 Apr 17];116(1):66–76. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/19885928>
50. Xiao R, Badger TM, Simmen F a. Dietary exposure to soy or whey proteins alters colonic global gene expression profiles during rat colon tumorigenesis. *Molecular cancer* [Internet]. 2005 Jan 11 [cited 2013 Apr 29];4(1):1. Available from: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=545049&tool=pmcentrez&rendertype=abstract>
51. Zhang J, Lazarenko OP, Wu X, Tong Y, Blackburn ML, Gomez-Acevedo H, et al. Differential effects of short term feeding of a soy protein isolate diet and estrogen treatment on bone in the pre-pubertal rat. *PloS one* [Internet]. 2012 Jan [cited 2013 May 7];7(4):e35736. Available from: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=3335011&tool=pmcentrez&rendertype=abstract>
52. Franke AA, Custer LJ, Wilkens LR, Le Marchand L Le, Nomura AMY, Goodman MT, et al. Liquid chromatographic-photodiode array mass spectrometric analysis of dietary phytoestrogens from human urine and blood. *Journal of chromatography B* [Internet]. 2002 Sep 25;777(1-2):45–59. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/12270199>

53. Setchell KDR, Cole SJ. Method of defining equol-producer status and its frequency among vegetarians. *The Journal of nutrition* [Internet]. 2006 Aug;136(8):2188–93. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/16857839>
54. University of Kansas Medical Center. Protocol for RNA isolation using TRIzol Reagent with Phase Lock GelHeavy [Internet]. Kansas City, KS; Available from: <http://www2.kumc.edu/siddrc/microarray/PhaseLockGelprotocol.pdf>
55. University of Kansas Medical Center Genome Sequencing Facility. Illumina TruSeq RNA Sample Prep (LT) Protocol [Internet]. Kansas City, KS; Available from: [http://www.kumc.edu/Documents/gsf/illumina TruSeq RNA Protocol.pdf](http://www.kumc.edu/Documents/gsf/illumina%20TruSeq%20RNA%20Protocol.pdf)
56. Babraham Bioinformatics. FastQC [Internet]. Cambridge, UK: Babraham Institute; 2012. Available from: <http://www.bioinformatics.babraham.ac.uk/projects/fastqc/>
57. Kim D, Pertea G, Trapnell C, Pimentel H, Kelley R, Salzberg SL. TopHat2: accurate alignment of transcriptomes in the presence of insertions, deletions and gene fusions. *Genome biology* [Internet]. BioMed Central Ltd; 2013 Apr 25 [cited 2013 May 21];14(4):R36. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/23618408>
58. Aronesty E. Command-line tools for processing biological sequencing data [Internet]. 2011. Available from: <http://code.google.com/p/ea-utils>
59. DeLuca DS, Levin JZ, Sivachenko A, Fennell T, Nazaire M-D, Williams C, et al. RNA-SeQC: RNA-seq metrics for quality control and process optimization. *Bioinformatics* (Oxford, England) [Internet]. 2012 Jun 1 [cited 2013 May 22];28(11):1530–2. Available from: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=3356847&tool=pmcentrez&rendertype=abstract>

60. Anders S. HTSeq. 2010.
61. Ensembl. Human assembly and gene annotation. Ensembl release 72. 2013.
62. R Core Team. R: A language and environment for statistical computing [Internet]. Vienna, Austria: R Foundation for Statistical Computing; 2013. Available from: <http://www.r-project.org/>
63. Hamilton-Reeves JM, Banerjee S, Banerjee S, Holzbeierlein J, Thrasher JB, Kambhampati S, et al. Short-term soy isoflavone intervention in patients with localized prostate cancer: a randomized, double-blind, placebo-controlled trial. PloS one.
64. FGA fibrinogen alpha chain. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.
65. FGB fibrinogen beta chain. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.
66. Savli H, Szendrői A, Romics I, Nagy B. Gene network and canonical pathway analysis in prostate cancer: a microarray study. Experimental & molecular medicine [Internet]. 2008 Apr 30;40(2):176–85. Available from: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2679302&tool=pmcentrez&rendertype=abstract>
67. Kakkar A, DeRuvo N, Chinswangwatanakul V, Tebbutt S, Williamson R. Extrinsic-pathway activation in cancer with high factor VIIa and tissue factor. The Lancet [Internet]. 1995;346(8981):1004–5. Available from: <http://search.proquest.com/docview/198968962?accountid=28920>

68. Choi J-W, Liu H, Song H, Park JHY, Yun JW. Plasma marker proteins associated with the progression of lung cancer in obese mice fed a high-fat diet. *Proteomics* [Internet]. 2012 Jun [cited 2013 Jun 27];12(12):1999–2013. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/22744879>
69. Lindén M, Segersten U, Runeson M, Wester K, Busch C, Pettersson U, et al. Tumour expression of bladder cancer-associated urinary proteins. *BJU international* [Internet]. 2013 Mar 7 [cited 2013 Jun 27];1–9. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/23470167>
70. S100A7 S100 calcium binding protein A7. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.
71. Ye L, Sun P-H, Martin T a, Sanders AJ, Mason MD, Jiang WG. Psoriasin (S100A7) is a positive regulator of survival and invasion of prostate cancer cells. *Urologic oncology* [Internet]. 2012 Jun 11 [cited 2013 Jun 27];1–8. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/22694938>
72. CXCL5 chemokine (C-X-C motif) ligand 5. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.
73. Begley LA, Kasina S, Mehra R, Adsule S, Admon AJ, Lonigro RJ, et al. CXCL5 Promotes Prostate Cancer Progression. *Neoplasia*. 2008;10(3):244–54.
74. Mathieu J, Zhang Z, Zhou W, Wang AJ, Heddlestone JM, Pinna CMA, et al. HIF induces human embryonic stem cell markers in cancer cells. *Cancer Res*. 2011;71(13):4640–52.
75. BMP5 bone morphogenetic protein 5. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.

76. WNT2 wingless-type MMTV integration site family member 2. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.
77. Aruga J, Nozaki Y, Hatayama M, Odaka YS, Yokota N. Expression of ZIC family genes in meningiomas and other brain tumors. BMC cancer [Internet]. 2010 Jan;10:79. Available from:  
  
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2838823&tool=pmcentrez&rendertype=abstract>
78. CFD complement factor D (adipsin) [Internet]. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013. Available from:  
  
<http://www.ncbi.nlm.nih.gov.proxy.kumc.edu:2048/gene/1675>
79. Ribeiro R, Monteiro C, Silvestre R, Castela A, Coutinho H, Fraga A, et al. Human periprostatic white adipose tissue is rich in stromal progenitor cells and a potential source of prostate tumor stroma. Experimental biology and medicine (Maywood, N.J.) [Internet]. 2012 Oct 1 [cited 2013 Jun 27];237(10):1155–62. Available from:  
  
<http://www.ncbi.nlm.nih.gov/pubmed/23038706>
80. CR2 complement component (3d/Epstein Barr virus) receptor 2. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.
81. Michaelis M, Doerr HW. The Story of Human Cytomegalovirus and Cancer: Increasing Evidence and Open Questions. Neoplasia. 2009;11(1):1–9.
82. PADI3 peptidyl arginine deiminase, type III [Internet]. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013. Available from:  
  
<http://www.ncbi.nlm.nih.gov.proxy.kumc.edu:2048/gene/51702>

83. Chang X, Han J, Pang L, Zhao Y, Yang Y, Shen Z. Increased PADI4 expression in blood and tissues of patients with malignant tumors. BMC cancer [Internet]. 2009 Jan [cited 2013 Jun 27];9:40. Available from:  
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2637889&tool=pmcentrez&rendertype=abstract>
84. Chang X, Fang K. PADI4 and tumourigenesis. Cancer cell international [Internet]. 2010 Jan;10:7. Available from:  
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2845578&tool=pmcentrez&rendertype=abstract>
85. De Bari L, Moro L, Passarella S. Prostate cancer cells metabolize d-lactate inside mitochondria via a D-lactate dehydrogenase which is more active and highly expressed than in normal cells. FEBS letters [Internet]. 2013 Mar 1 [cited 2013 May 22];587(5):467–73. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/23333299>
86. Wu H-J, Chan W-H. Genistein protects methylglyoxal-induced oxidative DNA damage and cell injury in human mononuclear cells. Toxicology in vitro : an international journal published in association with BIBRA [Internet]. 2007 Apr [cited 2013 Jul 3];21(3):335–42. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/17049802>
87. RBP4 retinol binding protein 4. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.
88. LBP lipopolysaccharide binding protein. Bethesda, MD: National Center for Biotechnology, US National Library of Medicine; 2013.

89. Heumann D, Bas S, Gallay P, Le Roy D, Barras C, Mensi N, et al. Lipopolysaccharide binding protein as a marker of inflammation in synovial fluid of patients with arthritis: correlation with interleukin-6 and C-reactive protein. *J Rheumatol*. 1995;22(7):1224–9.
90. Farjo KM, Farjo R a, Halsey S, Moiseyev G, Ma J-X. Retinol-binding protein 4 induces inflammation in human endothelial cells by an NADPH oxidase- and nuclear factor kappa B-dependent and retinol-independent mechanism. *Molecular and cellular biology* [Internet]. 2012 Dec [cited 2013 Jul 3];32(24):5103–15. Available from: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=3510526&tool=pmcentrez&rendertype=abstract>
91. Hudgens ED, Ji L, Carpenter CD, Petersen SL. The gad2 promoter is a transcriptional target of estrogen receptor  $\alpha$  (ER $\alpha$ ) and ER $\beta$ : A unifying hypothesis to explain diverse effects of estradiol. *J Neurosci*. 2009;29(27):8790–7.
92. Lampe JW, Bigler J, Bush AC, Potter JD. Prevalence of polymorphisms in the human UDP-glucuronosyltransferase 2B family: UGT2B4(D458E), UGT2B7(H268Y), and UGT2B15(D85Y). *Cancer Epidemiol Biomarkers Prev*. 2000;9:329–33.